#### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000013200

**Entity Name: BANDENIA FOUNDATION INC** 

Mar 29, 2023 Secretary of State 9745485670CC

**FILED** 

## **Current Principal Place of Business:**

1401 N. UNIVERSITY DR SUITE 501

CORAL SPRINGS, FL 33071

# **Current Mailing Address:**

1401 N. UNIVERSITY DR SUITE 501 CORAL SPRINGS, FL 33071 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CARMONA & ASSOCIATES, INC. 7270 NW 12 STREET SUITE 645 MIAMI, FL 33126 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EMERSON CARMONA 03/29/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VC, CEO Title HEAD OF HUMAN RESOURCES

Name PASTORE, FABIO Name ARTILES, JOSE MIGUEL JR

Address VIA DANTE VERONI 32 Address 1111 BRICKELL AVENUE

City-State-Zip: VELLETRI 00049

City-State-Zip: MIAMI FL 33131

Title HEAD OF INTERNAL AUDIT

Title CHAIRMAN, NON-EXECUTIVE Name BULENT, OSMAN DIRECTOR

Address 117 LEAVES GREEN RD Name ARTILES, JOSE M

KESTON KENT BR2 6DG Address 1111 BRICKELL AVENUE

City-State-Zip: KESTON KENT BR5 3LZ STE 2807

City-State-Zip: MIAMI FL 33131

Name MODAFFERI, GIOVANNI Title HEAD OF COMMERCIAL

Address 77 YORK STREET DEPARTMENT

Name SALIBA, GEORGE
City-State-Zip: BEDFORD MK403RN

Address 3410 GALT OCEAN DRIVE APT 610

Title HEAD OF BUSINESS BANKING

Name PEROZZI, SALVATORE City-State-Zip: NROTH FT LAUDERDALE FL 33308

Address VIA GENERALE Title HEAD OF RETAIL BANKING

DALLA CHIESA 2 Name PIETRO, GRILLO

City-State-Zip: DESENSANO GARDA ITALY 25015

Address 1 ITALY

City-State-Zip: ITALY ITALY ITALY

### Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSE MIGUEL ARTILES C 03/29/2023

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

DIRECTOR, SECRETARY HEAD OF LEGAL DEPARTMENT Title Title

MORICI, ALBERTO Name Name MUSCOGIURI, NICOLA

Address 1401 N. UNIVERSITY DR Address 1401 N. UNIVERSITY DR SUITE 501

SUITE 501

City-State-Zip: CORAL SPRINGS FL 33071 City-State-Zip: CORAL SPRINGS FL 33071