### **2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000002173

**Entity Name: NELSON BENJAMIN FOUNDATION INCORPORATED** 

FILED Sep 22, 2022 Secretary of State 3457318479CC

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

20442 NW 7 CT

MIAMI GARDENS, FL 33169

## **Current Mailing Address:**

20442 NW 7 CT

MIAMI GARDENS. FL 33169

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

BENJAMIN, CHRISTOPHER C/O INTERNATIONAL LAW PARTNERS, LLP 2122 HOLLYWOOD BOULEVARD HOLLYWOOD, FL 33020 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: CHRISTOPHER BENJAMIN

09/22/2022

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title P Title VP

NameBENJAMIN, CHRISTOPHERNameBENJAMIN, AMIRAddressPO BOX 694011AddressPO BOX 694011

City-State-Zip: MIAMI GARDENS FL 33169 City-State-Zip: MIAMI GARDENS FL 33169

Title D Title D

NameNELSON, RASHADNameNELSON, CHRISTOPHERAddress3278 APPLING WAYAddress2600 STREAMVIEW DRIVECity-State-Zip:DURHAM NC 27703City-State-Zip:ODENTON MD 21113

Title D Title D

Name NELSON, SONYA Name BROWN, ZAMIR

Address 3278 APPLING WAY Address 1220 EAST WEST HIGHWAY

APT. #1620 City-State-Zip: DURHAM NC 27703

City-State-Zip: SILVER SPRINGS MD 20910

Title DIRECTOR

Name BENJAMIN, LAYLA Address 20442 NW 7 CT

City-State-Zip: MIAMI GARDENS FL 33169

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: CHRISTOPHER BENJAMIN

**PRESIDENT** 

09/22/2022