

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000002196

Entity Name: HELP FOR VENEZUELA FOUNDATION INC**Current Principal Place of Business:**8501 SW 20TH TER
MIAMI, FL 33155**Current Mailing Address:**8501 SW 20TH TER
MIAMI, FL 33155**FEI Number: 86-2417892****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASTELLANOS, ADRIANA
8501 SW 20TH TER
MIAMI, FL 33155 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	CASTELLANOS, ADRIANA
Address	8501 SW 20TH TER
City-State-Zip:	MIAMI FL 33155

Title	SECRETARY
Name	MIGUEL, DANIEL
Address	8501 SW 20TH TER
City-State-Zip:	MIAMI FL 33155

Title	DIRECTOR
Name	MARCHAN, MAYRA JOSE
Address	1391 NW 187TH AV
City-State-Zip:	PEMBROKE PINES FL 33029

Title	DIRECTOR
Name	COROBO, ROBERTO
Address	8100 NW 53RD ST APT 281
City-State-Zip:	DORAL FL 33166

Title	VP
Name	DUPUY , JAMILET
Address	174 SW 159 WAY
City-State-Zip:	SUNRISE FL 33326

Title	TREASURER
Name	CAMACHO, MARIA ALEJANDRA
Address	15434 SW 119TH STREETQ
City-State-Zip:	MIAMI FL 33196

Title	DIRECTOR
Name	PULIDO, MARYORITT
Address	1058 NW 129 AVE
City-State-Zip:	MIAMI FL 33182

Title	DIRECTOR
Name	FERRER, HILDA
Address	9104 SW 152ND PATH
City-State-Zip:	MIAMI FL 33196

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: ADRIANA CASTELLANOS**PRESIDENT****04/29/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date