

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000009503

Entity Name: THE LAST HUNDRED, INC.

Current Principal Place of Business:

2275 BISCAYNE BLVD APT 1007
MIAMI, FL 33137

Current Mailing Address:

2275 BISCAYNE BLVD APT 1007
MIAMI, FL 33137 US

FEI Number: 87-2130260

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

D'INGIULLO, DANIELA
2275 BISCAYNE BLVD APT 1007
MIAMI, FL 33137 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 DP
Name TRIGOS, JUAN
Address 2275 BISCAYNE BLVD APT 1007
City-State-Zip: MIAMI FL 33137

Title DV
Name BONACOSSA, FEDERICO
Address 11839 SW 155TH CT
City-State-Zip: MIAMI FL 33196

Title DV
Name TATIANA MARIA SCHNITMAN
ESPINDOLA
Address 1770 SW 107TH AVE APT 101
City-State-Zip: MIAMI FL 33196

Title DTS
Name D'INGIULLO, DANIELA
Address 2275 BISCAYNE BLVD APT 1007
City-State-Zip: MIAMI FL 33137

Title DAT
Name CAMILO OSWALDO ARTEAGA
BARRIOS
Address 7061 NW 8TH CT
City-State-Zip: PLANTATION FL 33317

Title D
Name BAUMGARTEN, HANNAH
Address 900 BAY DRIVE 925
City-State-Zip: MIAMI BEACH FL 33141

Title D
Name SCHARRON, ELADIO
Address 14462 CALABAY COURT
City-State-Zip: ORLANDO FL 32837

Title D
Name NEVENA STANIC KOVACEVIC
Address 5791 SW 74TH TERRACE
APT 15
City-State-Zip: SOUTH MIAMI FL 33178

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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: DANIELA D'INGIULLO

**SECRETARY AND
TREASURES**

04/29/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name VIDAL, ADOLFO
Address 11607 NW 48 LN
City-State-Zip: DORAL FL 33178