

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000013356

**FILED  
Apr 18, 2024  
Secretary of State  
2998064262CC**

**Entity Name:** ALTRUISTIC1122 CORP

**Current Principal Place of Business:**

158 BORACAY CIRCLE  
STE# 1122  
ST JOHNS, FL 32259-9314

**Current Mailing Address:**

509 SENTOSA DRIVE  
STE # 211  
ST. JOHNS, FL 32259 UN

**FEI Number:** 92-0998046

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CABRAL, ANGELA  
158 BORACAY CIRCLE  
STE # 1122  
ST JOHNS, FL 32259-9314 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:** ANGELA CABRAL

04/18/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name CABRAL, SAVANNAH A  
Address 509 SENTOSA DRIVE #211  
City-State-Zip: SAINT JOHNS 32259

Title SRVP  
Name MAGDA, BRANDON D  
Address 2204 BENTON  
City-State-Zip: MESA AZ 85209

Title VP  
Name CABRAL, GEORGE  
Address 507A BARWICK CRES  
City-State-Zip: WATERLOO ON N2K 3P6

Title SEC  
Name CABRAL, ANGELA  
Address 158 BORACAY CIRCLE  
STE 1122  
City-State-Zip: ST JOHNS FL 32259-9314

*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:** ANGELA CABRAL

SEC

04/18/2024

Electronic Signature of Signing Officer/Director Detail

Date