

2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003853

Entity Name: THE WORLD OF MONTECRISTO RELIEF ORGANIZATION, INC.**Current Principal Place of Business:**5900 N. ANDREWS AVENUE
FT. LAUDERDALE, FL 33309**Current Mailing Address:**5900 N. ANDREWS AVENUE
FT. LAUDERDALE, FL 33309 US**FEI Number:** 65-0929260**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 DIRECTOR, PRESIDENT
Name WILKEY, ROB
Address 714 GREEN VALLEY ROAD
City-State-Zip: GREENSBORO NC 27408

Title DIRECTOR
Name ESTADES, JAVIER
Address 5900 N. ANDREWS AVENUE
City-State-Zip: FT. LAUDERDALE FL 33309

Title SECRETARY
Name ROSENFELD, JANELLE
Address 5900 N. ANDREWS AVENUE
City-State-Zip: FT. LAUDERDALE FL 33309

Title DIRECTOR
Name LEVY, ERIC
Address 5900 N. ANDREWS AVENUE
City-State-Zip: FT. LAUDERDALE FL 33309

Title TREASURER
Name SOLIDAY, RAYMOND
Address 714 GREEN VALLEY RD.
City-State-Zip: GREENSBORO NC 27408

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: ROB WILKEY

PRESIDENT

01/03/2018

Electronic Signature of Signing Officer/Director Detail_____
Date