

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90401 032 ****70.00

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1. Entity Name
SAFEGUARDING AMERICAN VALUES FOR EVERYONE, INC.



Principal Place of Business
**6445 N.E. 7TH AVENUE
2ND FLOOR
MIAMI, FL 33138 US**

Mailing Address
**12864 BISCAYNE BOULEVARD
#338
NORTH MIAMI BEACH, FL 33181**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04242008

Chg-NP

CR2E037 (12/06)

4. FEI Number

65-0430497

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PENA, HEDDY
5541 SW 64 PLACE
MIAMI, FL 33155**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Heddy Pena

4/24/08

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **PENA, HEDDY**
STREET ADDRESS **5541 S.W. 64 PLACE**
CITY-ST-ZIP **MIAMI, FL 33155**

TITLE **C** ☐ Delete
NAME **TALAVERA, JUAN**
STREET ADDRESS **412 SW 18TH ROAD**
CITY-ST-ZIP **MIAMI, FL 33129**

TITLE **V** ☐ Delete
NAME **GOLDBERG, JUDD**
STREET ADDRESS **10110 EAST BROADVIEW DRIVE**
CITY-ST-ZIP **BAY HARBOUR, FL 33154**

TITLE **D** ☐ Delete
NAME **FALK, JOSEPH**
STREET ADDRESS **1770 MICANOPY AVENUE**
CITY-ST-ZIP **MIAMI, FL 33133**

TITLE **S** ☐ Delete
NAME **REGALADO, ELIZABETH**
STREET ADDRESS **6751 SW 75TH TERRACE**
CITY-ST-ZIP **SOUTH MIAMI, FL 33143**

TITLE **T** ☐ Delete
NAME **HECHT, JEFFREY**
STREET ADDRESS **650 WEST AVE, APT. 3112**
CITY-ST-ZIP **MIAMI BEACH, FL 33139**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **MICHAEL DECOSSIO**
STREET ADDRESS **7819 NW 166 TERR.**
CITY-ST-ZIP **HALEAH, FL 33018**

TITLE **D** ☐ Change ☒ Addition
NAME **ANDREW FRIEDMAN**
STREET ADDRESS **869 NE 82 ST.**
CITY-ST-ZIP **MIAMI, FL 33138**

TITLE **D** ☐ Change ☒ Addition
NAME **GEORGE KETELHOHN**
STREET ADDRESS **185 NW 107 ST.**
CITY-ST-ZIP **MIAMI SHORES, FL 33168**

TITLE **D** ☐ Change ☒ Addition
NAME **PAMELA SWEENEY**
STREET ADDRESS **2121 SW 24 ST.**
CITY-ST-ZIP **MIAMI, FL 33145**

TITLE **D** ☐ Change ☒ Addition
NAME **ALFREDO IGLESIAS**
STREET ADDRESS **652 NE 63 ST. #101**
CITY-ST-ZIP **MIAMI, FL 33138**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Heddy Pena / Heddy Pena

4/24/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #