

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000009906

**Entity Name:** NUCHIM FOUNDATION CORP.

**Current Principal Place of Business:**

18001 OLD CUTLER RD.  
SUITE 401  
VILLAGE OF PALMETTO BAY, FL 33157

**Current Mailing Address:**

18001 OLD CUTLER RD.  
SUITE 401  
VILLAGE OF PALMETTO BAY, FL 33157

**FEI Number:** 51-0615943

**Certificate of Status Desired:** Yes

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

RAPAPORT, CARLOS  
18001 OLD CUTLER RD., SUITE 401  
VILLAGE OF PALMETTO BAY, FL 33157 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            PRES  
Name            RAPAPORT, CARLOS  
Address        18001 OLD CUTLER RD. SUITE 401  
City-State-Zip: PALMETTO BAY FL 33157

Title            DIR  
Name            RAPAPORT, GUILLERMO  
Address        18001 OLD CUTLER RD. SUITE 401  
City-State-Zip: PALMETTO BAY FL 33157

Title            DIR  
Name            RAPAPORT, RICHARD  
Address        18001 OLD CUTLER RD. SUITE 401  
City-State-Zip: PALMETTO BAY FL 33157

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:** GUILLERMO RAPAPORT

**DIR**

**04/30/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date