

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000009297

Entity Name: S.E.E.K. FOUNDATION, INC.**Current Principal Place of Business:**990 BISCAYNE BLVD
OFFICE 503
MIAMI , FL 33132**Current Mailing Address:**990 BISCAYNE BLVD. OFFICE 503
MIAMI, FL 33132 US**FEI Number:** 46-1652355**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SAKARIYAWO, ANIKE L.
990 BISCAYNE BLVD
OFFICE 503
MIAMI , FL 33132 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:** ANIKE SAKARIYAWO**04/30/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO, PRESIDENT
Name SAKARIYAWO, ANIKE LMS.
Address 990 BISCAYNE BLVD
OFFICE 503
City-State-Zip: MIAMI FL 33132

Title SECRETARY
Name ORTIZ, KATYRIA
Address 990 BISCAYNE BLVD
OFFICE 503
City-State-Zip: MIAMI FL 33132

Title ASST. SECRETARY
Name SAKARIYAWO, WAZIRI
Address 990 BISCAYNE BLVD
OFFICE 503
City-State-Zip: MIAMI FL 33132

Title ASST. TREASURER
Name SAKARIYAWO, CALVIN
Address 990 BISCAYNE BLVD
OFFICE 503
City-State-Zip: MIAMI FL 33132

Title TREASURER
Name WILLIAMS, SUMMER ESQ.
Address 990 BISCAYNE BLVD
OFFICE 503
City-State-Zip: MIAMI FL 33132

Title VP
Name LEWIS, DWAYNE
Address 990 BISCAYNE BLVD
OFFICE 503
City-State-Zip: MIAMI FL 33132

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: ANIKE SAKARIYAWO**C.E.O /PRESIDENT****04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date