#### 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: SAL MAIWANDI

Electronic Signature of Signing Officer/Director Detail

Entity Name: SAL & ZARI MAIWANDI FOUNDATION, INC.

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# **Current Principal Place of Business:**

1557 LAKE WHITNEY DRIVE WINDERMERE, FL 34786

DOCUMENT# N14000011273

# **Current Mailing Address:**

**1557 LAKE WHITNEY DRIVE** WINDERMERE, FL 34786

# FEI Number: 47-3188563

### Name and Address of Current Registered Agent:

MAIWANDI, SAL 1557 LAKE WHITNEY DRIVE WINDERMERE, FL 34786 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

#### **Officer/Director Detail :**

Title	DP	Title	DST
Name	MAIWANDI, SAL	Name	MAIWANDI, ZARI
Address	1557 LAKE WHITNEY DRIVE	Address	1557 LAKE WHITNEY DRIVE
City-State-Zip:	WINDERMERE FL 34786	City-State-Zip:	WINDERMERE FL 34786
Title	D		
Title Name	D CHRISTIAN, SABRINA		
	-		

PRESIDENT

FILED Jan 29, 2023 Secretary of State 2914698065CC

Certificate of Status Desired: No

Date