

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000010823

**FILED  
Mar 17, 2017  
Secretary of State  
CC6325165015**

**Entity Name:** DIVINE INTERVENTION FOR THE INNOCENT FOUNDATION, INC.

**Current Principal Place of Business:**

1141 N.E. 142ND ST.  
N. MIAMI, FL 33161

**Current Mailing Address:**

P.O. BOX 612965  
MIAMI, FL 33261 US

**FEI Number: 81-4389739**

**Certificate of Status Desired: No**

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

LANAU, NATHALIE  
1141 N.E. 142ND ST.  
N. MIAMI, FL 33161 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	P/D	Title	VP/D
Name	LANAU, NATHALIE	Name	KIRKSEY, QUATECA
Address	P.O. BOX 612965	Address	P.O. BOX 612965
City-State-Zip:	MIAMI FL 33261	City-State-Zip:	MIAMI FL 33261
Title	S/D	Title	S/D
Name	LANEAU, MARIANNE	Name	PIERRE, JOLAINE
Address	P.O. BOX 612965	Address	P.O. BOX 612965
City-State-Zip:	MIAMI FL 33261	City-State-Zip:	MIAMI FL 33261

*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: NATHALIE LANAU**

**DIRECTOR**

**03/17/2017**

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

\_\_\_\_\_  
Date