

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000012201

**Entity Name:** THIRD WAVE VOLUNTEERS INC**Current Principal Place of Business:**3566 VISTA COURT  
MIAMI, FL 33133**Current Mailing Address:**3566 VISTA COURT  
MIAMI, FL 33133 US**FEI Number:** 82-3731839**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ADVANTAGE ACCOUNTING AND TAX LLC  
2700 NORTH MILITARY TRAIL  
SUITE 200  
BOCA RATON, FL 33431 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:** ADVANTAGE ACCOUNTING & TAX**02/27/2025**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            THOMPSON, ALISON  
Address        3566 VISTA COURT  
City-State-Zip: MIAMI FL 33133

Title            DIR  
Name            PADRO, JUAN  
Address        1977 WEST 34TH AVE  
City-State-Zip: DENVER CO 80211

Title            DIR  
Name            BRAZIL, JAMES  
Address        4201 INDIAN CREEK DRIVE, #5  
City-State-Zip: MIAMI BEACH FL 33140

Title            DIRECTOR  
Name            PAVEN, LUCIANA  
Address        3566 VISTA COURT  
City-State-Zip: MIAMI FL 33133

Title            DIRECTOR  
Name            GREEN, MARK  
Address        3566 VISTA COURT  
City-State-Zip: MIAMI FL 33133

Title            DIRECTOR  
Name            PHOENIX, JYAKUEN FELLOW  
Address        2201 MARAVILLA DRIVE  
City-State-Zip: LOS ANGELES CA 90068

Title            DIRECTEOR  
Name            QUAY, NICK  
Address        8000 WEST DRIVE, 213  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title            DIRECTOR  
Name            MOHAMMED, KIRAN MATHUR  
Address        16, KELLY-KENNY STREET  
City-State-Zip: WOODBROOK PORT OF SPAIN

*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:** ALISON THOMPSON**PRESIDENT/DIRECTOR****02/27/2025**

Electronic Signature of Signing Officer/Director Detail

Date