

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000009494

Entity Name: CHASSE YOUR DREAMS INC.**Current Principal Place of Business:**7404 W HENRY AVE
TAMPA, FL 33615**Current Mailing Address:**7404 W HENRY AVE
TAMPA, FL 33615 US**FEI Number:** 83-1828677**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AMARO, LISETTE
7404 W HENRY AVE
TAMPA, FL 33615 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	PRESIDENT
Name	AMARO, LISETTE
Address	7404 W HENRY AVE
City-State-Zip:	TAMPA FL 33615

Title	V
Name	QUEVEDO, VIRGINIA
Address	13425 IOLA DR
City-State-Zip:	TAMPA FL 33626

Title	TREASURER, VP
Name	BARILE, HOPE
Address	1825 CITRUS ORCHARD WAY
City-State-Zip:	VALRICO FL 33594

Title	EXECUTIVE SECRETARY
Name	MARIA, VIROLAS
Address	4936 15TH AVE NORTH
City-State-Zip:	ST PETERSBURG FL 33710

Title	VP
Name	ZUCKERWAR, MARY CATHERINE
Address	2117 LARKSPUR CT
City-State-Zip:	TRINITY FL 34655

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: LISETTE AMARO

PRESIDENT

06/24/2023

Electronic Signature of Signing Officer/Director Detail_____
Date