

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000010518

Entity Name: MAHBELA INC.**Current Principal Place of Business:**641 SOUTHWEST 8TH AVENUE
DELRAY BEACH, FL 33444**Current Mailing Address:**641 SOUTHWEST 8TH AVENUE
DELRAY BEACH, FL 33444 US**FEI Number:** 84-3386012**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AUBIN, DIEUNICK
100 EAST LINTON BLVD
215B
DELRAY BEACH, FL 33484 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:** DIEUNICK AUBIN

03/12/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	ADVISOR
Name	JOSEPH, WILFRID
Address	641 SOUTHWEST 8TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33444

Title	PRESIDENT
Name	OVILUS, BANIEL
Address	641 SOUTHWEST 8TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33444

Title	T
Name	WILSON PIERRE JULES
Address	641 SOUTHWEST 8TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33444

Title	A
Name	JEROME, ALCESTE
Address	641 SOUTHWEST 8TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33444

Title	S
Name	DANTES, BUNSON
Address	641 SOUTHWEST 8TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33444

Title	A
Name	JOSEPH, WANGUY
Address	641 SOUTHWEST 8TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33444

Title	AUTHORIZED AGENT
Name	STINVIL, ISMAEL
Address	8 RUE FRANCOIS COUPERIN
City-State-Zip:	SAINT LEU LA FORET FRANCE 95320

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: BUNSON DANTES

SECRETAIRE

03/12/2024

Electronic Signature of Signing Officer/Director Detail

Date