## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000011032

Entity Name: CB EDUCATIONAL SERVICE CENTER BELEN CENTER INC.

**FILED** Feb 25, 2024 **Secretary of State** 2536685474CC

## **Current Principal Place of Business:**

5419 RATTLESNAKE HAMMOCK ROAD

204 F

NAPLES, FL, FL 34113

## **Current Mailing Address:**

5419 RATTLESNAKE HAMMOCK ROAD

NAPLES, FL, FL 34113 US

FEI Number: 85-2108341 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CEPEDA-MARTINEZ, ANGELICA M 5419 RATTLESNAKE HAMMOCK ROAD 204 F NAPLES, FL, FL 34113 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:

Title

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title

CEPEDA-MARTINEZ, ANGELICA M Name Name QUINONES-SANTIAGO, LAURA I

5419 RATTLESNAKE HAMMOCK HC02 BOX 14244 Address Address

**ROAD** 

CAROLINA OC 00987 City-State-Zip: 204 F

NAPLES, FL FL 34113 City-State-Zip:

Title TRFA

Name

Address 4825 20TH AVE. SE CEPEDA-MARTINEZ, JOANN Name

City-State-Zip: NAPLES FL 34117 187 COWNIE AVE SE Address

City-State-Zip: PALM BAY FL 32909

SEC

DELGADO, JENNESSEE

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.