

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000011439

**FILED**  
**Mar 04, 2023**  
**Secretary of State**  
**1165561693CC**

**Entity Name:** SOFIA'S HELPING HAND CORP.

**Current Principal Place of Business:**

9321 SW 151ST AVE  
MIAMI, FL 33196

**Current Mailing Address:**

9321 SW 151ST AVE  
MIAMI, FL 33916

**FEI Number:** 85-3446927

**Certificate of Status Desired:** No

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

MOTTA, AMANDA D  
9321 SW 151ST AVE  
MIAMI, FL 33916 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  
Name MOTTA, AMANDA  
Address 9321 SW 151ST AVE  
City-State-Zip: MIAMI FL 33916

Title VP  
Name MOTTA, RENATO  
Address 9321 SW 151ST AVE  
City-State-Zip: MIAMI FL 33196

Title MGR  
Name BLACKBURN, MELISSA  
Address 1 BROOKLINE CT  
City-State-Zip: CLAYTON NC 27527

Title MGR  
Name CARTER, SUSAN M  
Address 9329 SW 151ST AVE  
City-State-Zip: MIAMI FL 33196

Title VCOB  
Name MOTTA, SOFIA A  
Address 9321 SW 151ST AVE  
City-State-Zip: MIAMI FL 33916

Title MGR  
Name MONTENEGRO, KAREN  
Address 8510 MENTEITH TERRACE  
City-State-Zip: MIAMI LAKES FL 33016

*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:** SOFIA MOTTA

03/04/2023

Electronic Signature of Signing Officer/Director Detail

Date