

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000005261

**Entity Name:** VIVA IRENE INC**Current Principal Place of Business:**4530 S. ORANGE BLOSSOM TRAIL #960  
ORLANDO, FL 32839**Current Mailing Address:**4530 S. ORANGE BLOSSOM TRAIL #960  
ORLANDO, FL 32839 US**FEI Number:** 88-3238930**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAMILTON, NATOYA  
200 E. ROBINSON STREET STE. 1120  
ORLANDO, FL 32801 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 D  
Name MCBEAN, GENCIL  
Address 4530 S. ORANGE BLOSSOM TRAIL  
#960  
City-State-Zip: ORLANDO FL 32839

Title D  
Name JEAN-BAPTISE, ARGENS  
Address 4530 S. ORANGE BLOSSOM TRAIL  
#960  
City-State-Zip: ORLANDO FL 32839

Title CFO  
Name SMITH, TRECIA  
Address 801 GARSON AVE  
City-State-Zip: ROCHESTER NY 14609

Title T  
Name JAMES, POLLIANNA  
Address 3700 RUNDON DR.  
City-State-Zip: ORLANDO FL 32818

Title D  
Name COBBS, CONNIE  
Address 4530 S. ORANGE BLOSSOM TRAIL  
#960  
City-State-Zip: ORLANDO FL 32839

Title VP  
Name MOLLINGS, DELORES  
Address 1130 KEATS AVE.  
City-State-Zip: ORLANDO FL 32809

Title P  
Name HAMILTON, KAREN  
Address 7308 UDINE AVE  
City-State-Zip: ORLANDO FL 32819

Title S  
Name MOLLINGS, CARLA  
Address 3200 OLD WINTERGARDEN RD.  
City-State-Zip: ORLANDO FL 34761

*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:** KAREN HAMILTON**FOUNDER****04/30/2024**

Electronic Signature of Signing Officer/Director Detail

Date