2020 FLORIDA NOT FOR PROF	T CORPORATION ANNUAL REPORT
DOCUMENT# N22776	

Entity Name: KARDECIAN SPIRITIST FEDERATION OF FLORIDA INC.

Current Principal Place of Business:

965 SO. SHORE DR MIAMI BEACH, FL 33141

Current Mailing Address:

965 SO. SHORE DR MIAMI BEACH, FL 33141 US

FEI Number: 65-0034375

Name and Address of Current Registered Agent:

NETTO, MARCELO C 965 SO. SHORE DR MIAMI BEACH, FL 33141 US FILED Jan 06, 2020

Secretary of State

1785842636CC

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

	•			
	Title	P, PRESIDENT	Title	VP
	Name	NETTO, MARCELO	Name	AYRES, TEREZA
	Address	965 SOUTH SHORE DRIVE	Address	1302 NE 191 ST APT 123
	City-State-Zip:	MIAMI BEACH FL 33141	City-State-Zip:	-
	Title	SECRETARY	Title	TREASURER
	Name	MACHADO, JANAINA A	Name	BENETTI, SANDRA
	Address	1610 COUNTRY CLUB BLVD	Address	22613 MIDDLETOWN DR
	City-State-Zip:	CAPE CORAL FL 33990	City-State-Zip:	BOCA RATON FL 33428
	Title	VICE TREASURER	Title	VICE SECRETARY
	Name	ARAUJO, RITA	Name	MELLADO, CLAUDIA G
	Address	8800 BLIND PASS APT 6	Address	1302 NE 191 ST APT 123
	City-State-Zip:	ST PETE BEACH FL 33706	City-State-Zip:	
	Title	EVENTS DIRECTOR	Title	COMMUNICATIONS DIRECTOR
	Name	MARSHALL, ANDREIA	Name Address	PEREIRA SAIGG, LIBIA
	Address	965 SOUTH SHORE DRIVE		8201 THAMES BLVD APT B
	City-State-Zip:	MIAMI BEACH FL 33141		
			City-State-Zip:	BOCA RATON FL 33433

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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: MARCELO NETTO

PRESIDENT

01/06/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	AUDITOR DIRECTOR
Name	ALVES, ALEXANDER R
Address	680 BROOKSHIRE DR
City-State-Zip:	DAVENPORT FL 33837