

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23000012755

Entity Name: RESOURCES EDUCATION STABILITY TRANSITION
TRANSFORMATION R.E.S.T.T. INC.**FILED**
Apr 10, 2025
Secretary of State
7073085940CC**Current Principal Place of Business:**8333 W MCNAB RD
SUITE 110
TAMARAC, FL 33321**Current Mailing Address:**P.O. BOX 15264
PLANTATION, FL 33318 US**FEI Number: 93-4564041****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**AUGUSTIN, JESCHAMMA J CEO
8333 W MCNAB RD
SUITE 110
TAMARAC, FL 33321 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	DIRECTOR OF COUNSELING SERVICES
Name	AUGUSTIN, MIRLINE M
Address	8333 W MCNAB RD 110
City-State-Zip:	TAMARAC FL 33321

Title	VICE PRESIDENT/VICE CHAIR
Name	REGINE VENDRYIS, FABIENNE
Address	8333 W MCNAB RD. 110
City-State-Zip:	TAMARAC FL 33321

Title	T
Name	HONORE, HERBY
Address	8333 W MCNAB RD., SUITE 110
City-State-Zip:	TAMARAC FL 33321

Title	PRESIDENT AND EXECUTIVE DIRECTOR
Name	AUGUSTIN, JESCHAMMA J
Address	8333 W MCNAB RD., SUITE 110
City-State-Zip:	TAMARAC FL 33321

Title	S
Name	DAVIS, KYSHA
Address	8333 W MCNAB RD., SUITE 110
City-State-Zip:	TAMARAC FL 33321

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: JESCHAMMA AUGUSTIN**EXECUTIVE DIRECTOR****04/10/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date