

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35641

Entity Name: PENINSULA HOUSING DEVELOPMENT INC. VI**Current Principal Place of Business:**1223 SW 4 STREET
2ND FLOOR
MIAMI, FL 33135**Current Mailing Address:**1223 SW 4 STREET
2ND FLOOR
MIAMI, FL 33135 US**FEI Number:** 65-0198267**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DIAZ, GUARIONE M .
1223 SW 4TH STREET
2ND FLOOR
MIAMI, FL 33135 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	SECRETARY, DIRECTOR
Name	MASVIDAL, SERGIO
Address	6800 SW 80TH AVENUE
City-State-Zip:	MIAMI FL 33143

Title	PRESIDENT, DIRECTOR
Name	DIAZ, GUARIONE M
Address	1223 SW 4TH STREET
City-State-Zip:	MIAMI FL 33135

Title	DIRECTOR
Name	ALLEN, WILFREDO
Address	2250 SW 3RD AVENUE SUITE # 100
City-State-Zip:	MIAMI FL 33129

Title	DIRECTOR
Name	NAVARRO, MARTA
Address	1223 SW 4 STREET
City-State-Zip:	MIAMI FL 33135

Title	TREASURER, DIRECTOR
Name	SWITZER, RAQUEL C
Address	1360 S. DIXIE HWY SUITE 355
City-State-Zip:	CORAL GABLES FL 33146

Title	DIRECTOR
Name	BARREIRO, GLADYS
Address	2235 SW 8TH STREET APT.711
City-State-Zip:	MIAMI FL 33135

Title	DIRECTOR
Name	CUBELA, NOEL
Address	2414 SW 19TH TERRACE
City-State-Zip:	MIAMI FL 33145

Title	DIRECTOR
Name	FERNANDEZ, LUIS
Address	205 SW 23RD ROAD
City-State-Zip:	MIAMI FL 33129

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: GUARIONE M DIAZ**PRESIDENT****02/16/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date