

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000067105

Entity Name: MORISSEAU FAMILY INITIATIVE INC.**Current Principal Place of Business:**2335, PERSHING STREET,
APT 02
HOLLYWOOD, FL 33020**Current Mailing Address:**2335, PERSHING STREET,
APT 02
HOLLYWOOD, FL 33020 US**FEI Number:** 88-3947144**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MORISSEAU, ROBERTO R
2335, PERSHING STREET
APT 02
HOLLYWOOD, FL 33020 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	PRES
Name	MORISSEAU, STEEVE S
Address	14876, BLVD GOUIN
City-State-Zip:	ST-GENEVIEVE H9H1B3

Title	VP
Name	MORISSEAU, ROBERTO R
Address	2335, PERSHING STREET, APT 02
City-State-Zip:	HOLLYWOOD FL 33020

Title	VP
Name	BERGROME, SMITH S
Address	8, RUE VIGER
City-State-Zip:	ST-CONSTANT QUEBEC J5A1N7

Title	TREA
Name	SOUGENE, MARSHALL XAVIE M
Address	65, RUE SHERBROOKE EST SUITE 219
City-State-Zip:	MONTREAL QUEBEC H2X1C4

Title	SEC
Name	JONES, SAMUEL S
Address	3390, RUE BARCLAY
City-State-Zip:	MONTREAL QUEBEC H3S1K4

Title	DIR
Name	DESIRE, STEPHANIE S
Address	2666, WINDAGE DR SW
City-State-Zip:	MARIETTA GA 30008

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARSHALL XAVIER SOUGENE**TREASURER****04/27/2024**

Electronic Signature of Signing Officer/Director Detail

Date