

**2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000000063

**Entity Name:** CALUNAH, INCORPORATED

**Current Principal Place of Business:**

712 EAST 27TH STREET SUITE 1-F  
BROOKLYN, NY 11210

**Current Mailing Address:**

P.O. BOX 681919  
MIAMI, FL 33168 US

**FEI Number:** 71-1006724

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PIERRE, CLAUDINE BENECHÉ  
8910 NW 147TH TERRACE  
MIAMI LAKES, FL 33018 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:** CLAUDINE BENECHÉ PIERRE

06/30/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, CSF  
Name            PIERRE, CLAUDINE BENECHÉ  
Address        8910 NW 147TH TERRACE  
City-State-Zip: MIAMI LAKES FL 33018

Title            TREASURER, CSF  
Name            GERARD, DUVAL  
Address        2031 NW 28TH STREET  
City-State-Zip: OAKLAND PARK FL 33331

Title            ASST. TREASURER, CSF  
Name            JEAN, ADELINÉ  
Address        1410 NE 143 ST  
City-State-Zip: NORTH MIAMI FL 33161

Title            CHAIRMAN  
Name            SAINT LOUIS, ROBERNE PASTOR  
Address        20 WOODSTOCK DRIVE  
City-State-Zip: WHEATLEY HIGHTS NY 11798

Title            PRESIDENT  
Name            DUBREUZE, BECEL  
Address        P.O. BOX 1438  
City-State-Zip: MELVILLE NY 11747

Title            TREASURER  
Name            GERMAIN, JACQUELIN  
Address        1574 MANZANITA ST NW  
City-State-Zip: PALM BAY FL 32909

Title            SECRETARY, CSF  
Name            JEAN, ADELINÉ  
Address        1410 NE 143 STREET  
City-State-Zip: NORTH MIAMI FL 33161

*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:** CLAUDINE BENECHÉ PIERRE

PRESIDENT, CSF

06/30/2020

Electronic Signature of Signing Officer/Director Detail

Date