

2026 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000014558

Entity Name: PINNACLE CHANGE FOUNDATION INC.**Current Principal Place of Business:**2775 NE 187TH ST
UNIT 618
AVENTURA, FL 33180**Current Mailing Address:**2775 NE 187TH ST
UNIT 618
AVENTURA, FL 33180 US**FEI Number:** 87-4147196**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ECHAVARRIA, DAVID H
2775 NE 187TH
UNIT 618
AVENTURA, FL 33180 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 D
Name ECHAVARRIA, DAVID D
Address 491 IVES DAIRY RD E306
City-State-Zip: MIAMI FL 33179Title D
Name DENISOV, ANDREY
Address 2775 NE 187TH ST APT 225
City-State-Zip: AVENTURA FL 33180Title O
Name OHAYON, ORI
Address 19490 NE 23RD AVE
APT 703
City-State-Zip: MIAMI FL 33180Title O
Name GAL, AMIT SAUL
Address 3330 NE 190TH ST
APT 2110
City-State-Zip: AVENTURA FL 33180Title D
Name LARRIEU, OSCAR A
Address 2545 SOUTH BAYSHORE DR. APT 112
City-State-Zip: MIAMI FL 33133Title D
Name GIL, WILLIAM S
Address 5661 NW 187TH ST
City-State-Zip: MIAMI FL 33055Title O
Name GAL, ITAMAR YAKOV
Address 3330 NE 190TH ST
APT 2110
City-State-Zip: AVENTURA FL 33180Title O
Name GAL, MIA MIRIAM
Address 3330 NE 190TH ST
APT 2110
City-State-Zip: AVENTURA FL 33180**Continues on page 2**

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: DAVID ECHAVARRIA

D

01/25/2026

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	O	Title	O
Name	SAINT-JEAN, SCHLEIDEN	Name	ESPINOZA, SANTIAGO TADEO
Address	1595 NE 135TH ST APT 424	Address	3300 NE 191 ST APT 1804
City- State-Zip:	MIAMI FL 33161	City-State-Zip:	MIAMI FL 33180