

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707075

FILED
Mar 05, 2019
Secretary of State
4595447194CC

Entity Name: MIAMI OBEDIENCE CLUB INC

Current Principal Place of Business:

TROPICAL PARK
7900 SW 40 STREET
MIAMI, FL 33155

Current Mailing Address:

PO BOX 557189
MIAMI, FL 33255-7189 US

FEI Number: 23-7125622

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIEB, MICHAEL
7621 SW 176 ST
PALMETTO BAY, FL 33157 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: MICHAEL LIEB

03/05/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name LIEB, PATRICE
Address 7621 SW 176 ST
City-State-Zip: PALMETTO BAY FL 33157

Title VD
Name ARZA, MYLENE
Address 10775 SW 40 TERR.
City-State-Zip: MIAMI FL 33165

Title SD
Name CECILIA, ARMESTO
Address 230 SPRINGS AVENUE
City-State-Zip: MIAMI SPRINGS FL 33166

Title SD
Name SMITH, CINDY
Address 16101 SW 81 AVE.
City-State-Zip: PALMETTO BAY FL 33157

Title TD
Name SMITH, MIKE
Address 16101 SW 81 AVE.
City-State-Zip: PALMETTO BAY FL 33157

Title DIRECTOR
Name RUSSELL, DEBORAH
Address 9600 SW 187 ST
City-State-Zip: MIAMI FL 33157-7864

Title DIRECTOR
Name GRIFFITH, SHARI
Address 10442 SW 210 TERR.
City-State-Zip: MIAMI FL 33189

Title DIRECTOR
Name SIDRAN, JILL
Address 7971 SW 122 ST.
City-State-Zip: MIAMI FL 33156

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: PATRICE LIEB

PRESIDENT

03/05/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ZISMAN, LAURIE
Address 8240 SW 91 ST
City-State-Zip: MIAMI FL 33156