

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

DOCUMENT# 723679

**Entity Name:** MIAMI-DADE COUNTY LEAGUE OF CITIES, INC.

**Current Principal Place of Business:**

19 WEST FLAGLER STREET  
# 707  
MIAMI, FL 33130

**Current Mailing Address:**

19 WEST FLAGLER STREET  
# 707  
MIAMI, FL 33130 US

**FEI Number:** 65-0240302

**Certificate of Status Desired:** No

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

KUPER, RICHARD ESQ  
19 WEST FLAGLER STREET  
# 707  
MIAMI, FL 33130 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 IMMEDIATE PAST PRESIDENT  
Name LEONARD, JORDAN W.  
Address 9665 BAY HARBOR TERRACE  
City-State-Zip: BAY HARBOUR ISLANDS FL 33154

Title VP-1  
Name HARDEMON, KEON  
Address 3500 PAN AMERICAN DRIVE  
City-State-Zip: MIAMI FL 33133

Title SECRETARY  
Name BERMUDEZ, JUAN CARLOS  
Address 8401 NW 53RD TERRACE  
City-State-Zip: DORAL FL 33166

Title PRESIDENT  
Name CUBILLOS, CLAUDIA  
Address 500 NE 87TH STREET  
City-State-Zip: EL PORTAL FL 33138  
  
Title VP-2  
Name CORRADINO, JOSEPH M.  
Address 12645 PINECREST PARKWAY  
City-State-Zip: PINECREST FL 33156

Title TREASURER  
Name HARRIS, RODNEY  
Address 18605 NW 27TH AVENUE  
City-State-Zip: MIAMI GARDENS FL 33056

*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:** CLAUDIA CUBILLOS

**PRESIDENT**

**01/24/2020**

Electronic Signature of Signing Officer/Director Detail

Date