## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 737458** 

Entity Name: MIAMI RESCUE MISSION, INC.

**Current Principal Place of Business:** 

3553 NW 50TH STREET MIAMI. FL 33142

**Current Mailing Address:** 

3553 NW 50TH STREET MIAMI, FL 33142 US

FEI Number: 59-1743865 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TEW, JEFFREY ESQ 100 S.E. SECOND STREET **SUITE 2900** MIAMI, FL 33131 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:

City-State-Zip:

City-State-Zip:

Address

Title

Electronic Signature of Registered Agent

Date

**FILED** Mar 14, 2018

**Secretary of State** 

CC5235554198

Officer/Director Detail:

MIAMI FL 33131

D

Title Title D

**GUTIERREZ. PETE** Name BRUMMITT, RONALD Name

Address 3553 NW 50TH STREET Address 11454 SW 127TH COURT

City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33142

Title **SECRETARY** Title **CHAIRMAN** 

GORDON, ROGER Name Name TEW, JEFFREY

Address 14020 N MIAMI AVE Address 100 S. E. SECOND STREET

**SUITE 2900** MIAMI FL 33168 City-State-Zip:

Title

STEINBERGER, MARTY Name ACOSTA, CARLOS Name

711 PARADISO AVE Address

Address 11871 SW 43 STREET City-State-Zip: CORAL GABELS FL 33146 MIAMI FL 33175

Title DIRECTOR

**DIRECTOR** Title Name BEASOLEIL, MARK

Name LIOTTA, JOHN S Address 5550 GLADES ROAD

9672 NW 67TH PL

City-State-Zip: BOCA RATON FL 33431 City-State-Zip: PARKLAND FL 33076

Continues on page 2

600

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: RONALD BRUMMITT **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

03/14/2018 Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name GUZMAN, SOFIA Name TOSI-RENNA, BARBARA ANN

Address 6870 SW 16TH CT. Address 3308 ISLEWOOD AVENUE

City-State-Zip: NORTH LAUDERDALE FL 33068 City-State-Zip: WESTON FL 33332

Title DIRECTOR Title DIRECTOR

Name WASHINGTON-BROWN, LINDA Name ROMERO, CARLOS

Address 6283 N. W. 201 TERRACE Address 8181 N. W. 154 STREET

City-State-Zip: MIAMI FL 33015

City-State-Zip: MIAMI LAKES FL 33016