

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737458

**Entity Name:** MIAMI RESCUE MISSION, INC.**Current Principal Place of Business:**2159 NW 1ST COURT  
MIAMI, FL 33242-0620**Current Mailing Address:**2159 NW 1ST COURT  
MIAMI, FL 33242-0620 US**FEI Number:** 59-1743865**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TEW, JEFFREY ESQ  
FOUR SEASONS TOWER, 15TH FLOOR  
1441 BRICKEL AVENUE  
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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	BRUMMITT, RONALD
Address	2159 NW 1ST COURT
City-State-Zip:	MIAMI FL 33242

Title	CHAIRMAN
Name	TEW, JEFFREY
Address	1441 BRICKELL AVE, 15TH FLOOR
City-State-Zip:	MIAMI FL 33131

Title	D
Name	ACOSTA, CARLOS
Address	11871 SW 43 STREET
City-State-Zip:	MIAMI FL 33175

Title	DIRECTOR
Name	LYONS, WILLIAM L.
Address	825 WRIGHT STREET
City-State-Zip:	ENGLEWOOD FL 34223

Title	D
Name	GUTIERREZ, PETE
Address	11454 SW 127TH COURT
City-State-Zip:	MIAMI FL 33186

Title	SECRETARY
Name	GORDON, ROGER
Address	14020 N MIAMI AVE
City-State-Zip:	MIAMI FL 33168

Title	D
Name	STEINBERGER, MARTY
Address	711 PARADISO AVE
City-State-Zip:	CORAL GABELS FL 33146

Title	DIRECTOR
Name	LIOTTA, JOHN S
Address	9672 NW 67TH PL
City-State-Zip:	PARKLAND FL 33076

**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:** JEFFREY TEW

CHAIRMAN

03/06/2013

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                   DIRECTOR  
Name                 BEASOLEIL, MARK  
Address             5550 GLADES ROAD  
                       600  
City-State-Zip:   BOCA RATON FL 33431

Title                   DIRECTOR  
Name                 WADDELL, CHARLES  
Address             9036 NW 60TH STREET  
City-State-Zip:   TAMARAC FL 33321