

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737814

**FILED**  
**Mar 08, 2018**  
**Secretary of State**  
**CC9876685580**

**Entity Name:** GREATER MIAMI JEWISH FEDERATION, INC.

**Current Principal Place of Business:**

4200 BISCAYNE BLVD.  
MIAMI, FL 33137

**Current Mailing Address:**

4200 BISCAYNE BLVD.  
MIAMI, FL 33137 US

**FEI Number: 59-0624404**

**Certificate of Status Desired: No**

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

SOLOMON JACOB  
4200 BISCAYNE BLVD  
MIAMI, FL 33137 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 C  
Name AMY, DEAN N.  
Address 4200 BISCAYNE BLVD.  
City-State-Zip: MIAMI FL 33137

Title PPD  
Name BERRIN, ROBERT G.  
Address 4200 BISCAYNE BLVD.  
City-State-Zip: MIAMI FL 33137

Title P  
Name SOLOMON, JACOB  
Address 4200 BICAYNE BOULVARD  
City-State-Zip: MIAMI FL 33137

Title TREASURER  
Name BONWITT, ELISE SCHECK  
Address 4200 BISCAYNE BLVD.  
City-State-Zip: MIAMI FL 33137

Title SECRETARY  
Name ADLER, MATTHEW  
Address 4200 BISCAYNE BLVD.  
City-State-Zip: MIAMI FL 33137

Title CFO  
Name CARDINI, OKSANA  
Address 4200 BISCAYNE BLVD.  
City-State-Zip: MIAMI FL 33137

*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: OKSANA CARDINI**

**CFO**

**03/08/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date