2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 753293

Entity Name: THE BAKEHOUSE ART COMPLEX, INC.

FILED Apr 07, 2020 **Secretary of State** 3769250365CC

Current Principal Place of Business:

561 NW 32ND ST. MIAMI, FL 33127

Current Mailing Address:

561 NW 32ND ST. MIAMI, FL 33127 US

FEI Number: 59-2104864 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEFF, CATHY 561 NW 32ND ST. MIAMI, FL 33127 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 Title Ρ

Name KLINE, LAWRENCE Name KORMAN, JASON

806 DOUGLAS RD Address Address 1521 ALTON ROAD

SUITE 300 **SUITE 518**

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: MIAMI BEACH FL 33139

Title **SECRETARY** Title FD

Name RIEDI, CLAUDIO Name LEFF, CATHY

1111 BRICKELL AVENUE Address 561 NW 32ND ST. Address

SUITE 2200 City-State-Zip: MIAMI FL 33127 City-State-Zip: MIAMI FL 33131

Title DT

Title YAFFAR-PENA, LIA B Name

Name KRIPLEN, MARSH Address 561 NW 32ND ST. Address 561 NW 32ND ST.

City-State-Zip: MIAMI FL 33127 City-State-Zip: MIAMI FL 33127

Title **DIRECTOR** Title

KOFFLER, ADAM Name Name DIAZ, JOSE FELIX

Address 1000 VENETIAN WAY Address

561 NW 32ND ST. **EAST TOWER**

City-State-Zip: MIAMI FL 33139 City-State-Zip: MIAMI FL 33127

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.

04/07/2020 SIGNATURE: CATHY LEFF **AGENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name KING, CHRISTINE

Address 720 NE 62 STREET

РΗ

City-State-Zip: MIAMI FL 33137

Title DIRECTOR

Name DUVAL-CARRIE, EDOUARD

Address 225 NE 59 ST

City-State-Zip: MIAMI FL 33137

Title DIRECTOR

Name FREEMAN, BRENDA

Address 561 NW 32 STREET

City-State-Zip: MIAMI FL 33127