

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 756302

**Entity Name:** MIAMI BEACH COMMUNITY DEVELOPMENT CORPORATION, INC.**FILED**  
**Mar 06, 2023**  
**Secretary of State**  
**9212063971CC****Current Principal Place of Business:**935 PENNSYLVANIA AVE  
UNIT 102  
MIAMI BEACH, FL 33139**Current Mailing Address:**935 PENNSYLVANIA AVE  
UNIT 102  
MIAMI BEACH, FL 33139 US**FEI Number: 59-2110264****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**EMAMI, SHAHRZAD ESQ.  
NELSON MULLINS  
1905 NW CORPORATE BLVD SUITE 310  
BOCA RATON, FL 33431 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:** SHAHRZAD EMAMI**03/06/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** CHIEF OF OPERATIONS  
**Name** ARANGO, CRISTIAN A  
**Address** 935 PENNSYLVANIA AVE  
102  
**City-State-Zip:** MIAMI BEACH FL 33139**Title** CHAIRMAN  
**Name** HAMMON, MIKE  
**Address** 935 PENNSYLVANIA AVE  
102  
**City-State-Zip:** MIAMI BEACH FL 33139**Title** TREASURER  
**Name** PEREIRA, RAYMOND  
**Address** 935 PENNSYLVANIA AVE  
102  
**City-State-Zip:** MIAMI BEACH FL 33139**Title** SECRETARY  
**Name** WISEHEART, WILL  
**Address** 935 PENNSYLVANIA AVE  
102  
**City-State-Zip:** MIAMI BEACH FL 33139

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:** CRISTIAN ANDRES ARANGO**CHIEF OF OPERATIONS****03/06/2023**

Electronic Signature of Signing Officer/Director Detail

Date