| FEI Number: 59-2207150   |  |       | Certificate of Status Desired: No |            |
|--|--|-------|-----------------------------------|------------|
| Name and Address of Current Registered Agent:  |  |       |                                   |            |
| COLE, ROBIN H<br>1135 92ND STR<br>BAY HARBOR I   |  |       |                                   |            |
| 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  | : ROBIN COLE                             |       |                                   | 03/02/2015 |
|  | Electronic Signature of Registered Agent |       |                                   | Date       |
| Officer/Director Detail :  |  |       |                                   |            |
| Title  | VP                                       | Title | TRES                              |            |
| Name   | BERRIZ, DENISE                           | Name  | FRANKLIN, WILLIAM TJR             |            |
|  |  |       |                                   |            |

City-State-Zip:

HOMESTEAD FL 33032

**Current Principal Place of Business:** 5711 S. DIXIE HWY MIAMI, FL 33143

**DOCUMENT# 762700** 

Entity Name: NAMI OF MIAMI, INC.

## **Current Mailing Address:**

P.O. BOX 430230 MIAMI, FL 33243 US

# FEI Number: 59-2207150

## Na

City-State-Zip: MIAMI FL 33185

SECRETARY

LARRAURI, CARLOS

MIAMI FL 33176

9818 SW 94 TERRACE

### 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: WILLIAM FRANKLIN, JR

TREASURER

Electronic Signature of Signing Officer/Director Detail

FILED Mar 02, 2015 Secretary of State CC4840370836

# 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Title

Name

Address

City-State-Zip: