#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 765677** 

Entity Name: AMERICAN IMMIGRATION LAWYERS ASSOCIATION, SOUTH

FLORIDA CHAPTER, INC.

**FILED** Jan 07, 2015 Secretary of State CC2298091736

#### **Current Principal Place of Business:**

JEFFREY A. BERNSTEIN 100 N BISCAYNE BLVD #1602 MIAMI, FL 33132

# **Current Mailing Address:**

JEFFREY A. BERNSTEIN 100 N BISCAYNE BLVD #1602 MIAMI, FL 33132 US

FEI Number: 59-2237894 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

BERNSTEIN, JEFFREY A ESQ. 100 N. BISCAYNE BLVD **SUITE 1602** MIAMI, FL 33132 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: JEFFREY A. BERNSTEIN 01/07/2015

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

Title Title

RATZAN, JACOB BERNSTEIN, JEFFREY A Name Name

Address 1450 BRICKELL AVENUE Address 100 N. BISCAYNE BLVD. **SUITE 2600** 1602

MIAMI FL 33131 City-State-Zip: City-State-Zip: MIAMI FL 33132

Title Title

ARIAS, MAGGIE DEL CASTILLO-HRONSKY, CLAUDIA Name Name

2937 SW 27 AVENUE 8950 SW 74 COURT Address Address

SUITE 206 **SUITE 1702** 

City-State-Zip: MIAMI FL 33133 City-State-Zip: MIAMI FL 33156

Title FIRST VP Title SECRETARY

Name MARTINI, ANDREA Name VASTINE, MICHAEL Address 1600 PONCE DE LEON BLVD Address 16401 NW 37 AVENUE

MIAMI GARDENS FL 33054 CORAL GABLES FL 33134 City-State-Zip: City-State-Zip:

Title SECOND VP Title DIRECTOR Name CHUNG, SUI ROSE, JONATHAN Name

**2473 NW 7 STREET** Address 2964 AVIATION AVE Address

301

MIAMI FL 33125 City-State-Zip: MIAMI FL 33133

## 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.

01/07/2015 Τ SIGNATURE: JEFFREY A. BERNSTEIN

## Officer/Director Detail Continued:

Address

Title D Title D

Name LAMARDO, JULIANA Name MONTAVON-MCKILLIP, ANDREA

Address 2250 SW 3 AVENUE Address 7900 NOVA DRIVE

SUITE 501 SUITE 205

City-State-Zip: MIAMI FL 33129 City-State-Zip: DAVIE FL 33324

Title D Title PRESIDENT ELECT

Name ALDEN, CHRISTINE Name SHANE, EVAN

1401 BRICKELL AVENUE Address 500 WEST CYPRESS CREEK ROAD

SUITE 300 SUITE 470

City-State-Zip: MIAMI FL 33131 City-State-Zip: FT. LAUDERDALE FL 33309

Title DIRECTOR Title DIRECTOR

Name SHARPLESS, REBECCA Name SOLOW, BRUCE

Address 1311 MILLER ROAD Address 1000 E. ISLAND BLVD

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: AVENTURA FL 33160