

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 765677

Entity Name: AMERICAN IMMIGRATION LAWYERS ASSOCIATION, SOUTH FLORIDA CHAPTER, INC.

**FILED
Mar 29, 2023
Secretary of State
1712716682CC**

Current Principal Place of Business:

JULIANA G. LAMARDO
2900 SW 28TH TERRACE SUITE 203
MIAMI, FL 33133

Current Mailing Address:

JULIANA G. LAMARDO
2900 SW 28TH TERRACE SUITE 203
MIAMI, FL 33133 US

FEI Number: 23-7377937

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAMARDO, JULIANA G ESQ.
JULIANA G. LAMARDO
2900 SW 28TH TERRACE SUITE 203
MIAMI, FL 33133 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: JULIANA G. LAMARDO

03/29/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name LAMARDO, JULIANA G
Address JULIANA G. LAMARDO
 2900 SW 28TH TERRACE SUITE 203
City-State-Zip: MIAMI FL 33133

Title SECRETARY
Name ACOSTA-CASTRIZ, MIRIAM
Address 530 N FEDERAL HIGHWAY
City-State-Zip: LAKEWORTH FL 33460

Title PAST PRESIDENT
Name SANTANA, ELINA
Address 3663 SW 8TH STREET
 SUITE 206
City-State-Zip: MIAMI FL 33135

Title PRESIDENT
Name LAMMERS, KARLA R
Address 1101 BRICKELL AVENUE
 SOUTH TOWER SUITE 700
City-State-Zip: MIAMI FL 33131

Title 1ST VP
Name HERNANDEZ, PATRICIA
Address 10691 N. KENDALL DRIVE
 201
City-State-Zip: MIAMI FL 33176

Title DIRECTOR
Name RADULESCU, ANDREEA S
Address 1395 BRICKELL AVENUE
 SUITE 800
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name ECHEVARRIA, SANDRA
Address 14221 SW 120TH STREET
 SUITE 221
City-State-Zip: MIAMI FL 33186

Title DIRECTOR
Name NERO, DEIRDRE
Address 2100 PONCE DE LEON BLVD
 SUITE 1180
City-State-Zip: CORAL GABLES FL 33134

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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: JULIANA G LAMARDO

TREASURER

03/29/2023

Officer/Director Detail Continued :

Title PRESIDENT ELECT
Name KELLEY, LAURA
Address 8200 NW 41ST STREET
 SUITE 200
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name AIG, LAURA
Address 2730 SW 3RD AVE
 SUITE 501
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name GARCIA, KAITLYN
Address 8529 SIX FORKS ROAD
 FORUM IV SUITE 600
City-State-Zip: RALEIGH NC 27615

Title DIRECTOR
Name SANTOS, SOLIMAR
Address 201 S. BISCAYNE BLVD
 SUITE 200
City-State-Zip: MIAMI FL 33131

Title 2ND VP
Name POLO, GINA
Address 2 SOUTH BISCAYNE BOULEVARD
 SUITE 1500
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name CANDELA, ANA MARIA
Address 2730 SW 3RD AVE.
 SUITE 501
City-State-Zip: MIAMI, FL 33129

Title DIRECTOR
Name HERNANDEZ, HERIBERTO
Address 120 N. FEDERAL HWY
 SUITE 201
City-State-Zip: LAKE WORTH FL 33460

Title DIRECTOR
Name PUENTES, DAVID
Address 4300 BISCAYNE BLVD
 SUITE 204
City-State-Zip: MIAMI FL 33137