

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED

May 24, 2018

Secretary of State

CC4373163336

DOCUMENT# N0100004416

Entity Name: ARTS FOR LEARNING/MIAMI, INC.

Current Principal Place of Business:

404 NW 26 ST
MIAMI, FL 33127

Current Mailing Address:

404 NW 26 ST
MIAMI, FL 33127

FEI Number: 65-1141598

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WOMBLE, SHEILA
404 NW 26 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 DIRECTOR, VP
Name LEWIS, DANIEL
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

Title DIRECTOR, PRESIDENT
Name DE VRIES ASHLEY, DIANE
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

Title DIRECTOR
Name HEARN, ANTHONY
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

Title MGR
Name WOMBLE, SHEILA
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

Title DIRECTOR, SECRETARY
Name ISSA, N. ABRAHAM
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

Title DIRECTOR
Name ELLIOTT, BROOKE
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

Title DIRECTOR
Name FULLER, JOSH
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

Title DIRECTOR, TREASURER
Name HARRISON, CHRIS
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

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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: SHEILA WOMBLE

EXECUTIVE DIRECTOR

05/24/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FIGUEROA, SAMMY
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

Title DIRECTOR
Name BETTS, WILLIAM
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

Title DIRECTOR
Name MILLS, JANINE
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127

Title DIRECTOR
Name CORPION, KRISTEN
Address 404 NW 26 ST
City-State-Zip: MIAMI FL 33127