

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008174

Entity Name: ART DECO MUSEUM, INC.**Current Principal Place of Business:**1001 OCEAN DRIVE
MIAMI BEACH, FL 33139**Current Mailing Address:**PO BOX 190180
MIAMI BEACH, FL 33119-0180 US**FEI Number:** 59-1788634**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PYNES, STEVE
4581 POST AVENUE
MIAMI BEACH, FL 33140 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 | VC |
| Name | KINERK, MICHAEL |
| Address | 4855 PONCE DE LEON |
| City-State-Zip: | CORAL GABLES FL 33146 |

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|-----------------|----------------------|
| Title | CHAIRMAN |
| Name | PYNES, STEVE |
| Address | 4581 POST AVENUE |
| City-State-Zip: | MIAMI BEACH FL 33140 |

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|-----------------|----------------------|
| Title | SECRETARY |
| Name | HOLLAND, ERIC |
| Address | 616 WEST 47TH STREET |
| City-State-Zip: | MIAMI BEACH FL 33140 |

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|-----------------|-----------------------|
| Title | TREASURER |
| Name | BACHAY, JOHN |
| Address | 9328 NE 9 AVENUE |
| City-State-Zip: | MIAMI SHORES FL 33138 |

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|-----------------|-------------------------|
| Title | VC |
| Name | LUCE, CLOTILDE |
| Address | 301 OCEAN DRIVE #508 |
| City-State-Zip: | MIAMI BEACH FL 33139 |

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|-----------------|-----------------------|
| Title | VC |
| Name | JOHNSON, JACK |
| Address | 831 10TH STREET #5 |
| City-State-Zip: | MIAMI BEACH FL 33139 |

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|-----------------|----------------------|
| Title | VC |
| Name | LEE, RUSSELL |
| Address | 5 ISLAND AVE |
| 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: STEVE PYNES**CHAIRMAN****03/12/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date