

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000004411

**Entity Name:** MIAMI BEACH ART DECO WEEKEND, 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 LEE, RUSSELL M  
Address 5 ISLAND AVE  
#5H  
City-State-Zip: MIAMI BEACH FL 33139

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

Title VC  
Name KINERK, MICHAEL  
Address 4855 PONCE DE LEON  
City-State-Zip: CORAL GABLES FL 33146

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

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

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

Title VC  
Name JOHNSON, JACK  
Address 831 10TH STREET  
#5  
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****03/14/2018**

Electronic Signature of Signing Officer/Director Detail

Date