

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006470

**FILED**  
**Feb 04, 2016**  
**Secretary of State**  
**CC9904503809**

**Entity Name:** THE SUNDARI FOUNDATION, INC.

**Current Principal Place of Business:**

217 NW 15TH STREET  
MIAMI, FL 33136

**Current Mailing Address:**

3921 ALTON ROAD  
SUITE # 468  
MIAMI BEACH, FL 33140 US

**FEI Number:** 81-0652266

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

COLLINS, CONSTANCE ESQ  
1514 NW 2ND AVENUE  
#1  
MIAMI, FL 33136 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:** CONSTANCE COLLINS ESQ

02/04/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name COLLINS, CONSTANCE A  
Address 1514 NW 2ND AVENUE, #1  
City-State-Zip: MIAMI FL 33136

Title VP  
Name BELL, CYNTHIA  
Address 6794 BROOKLINE DRIVE  
City-State-Zip: MIAMI FL 33015

Title TRES  
Name ABREU, KIM  
Address C/O BANK OF AMERICA, N.A., ONE ALHAMBRA PLAZA, PENTHOUSE  
City-State-Zip: CORAL GABLES FL 33134

Title SEC  
Name FRUSCIANTE, ANNA SEC  
Address 1514 NW 2ND AVENUE, #1  
City-State-Zip: MIAMI FL 33136

Title DIR  
Name PETRICONE, JULIE  
Address 1311 CAPRI STREET  
City-State-Zip: CORAL GABLES FL 33134

Title DIR  
Name MOON, COBI  
Address 320 SW 33RD AVE  
City-State-Zip: MIAMI FL 33135

Title DIR  
Name WRIGHT, ANTONIA  
Address 1030 14TH STREET  
City-State-Zip: MIAMI BEACH FL 33139

Title DIR  
Name MARGULIES, MARTIN  
Address 445 GRAND BAY DRIVE, #PH1B  
City-State-Zip: KEY BISCAYNE FL 33149

**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.*

**SIGNATURE:** ANNA FRUSCIANTE

**DIRECTOR**

02/04/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIR  
Name VILLANO, KATHRYN MD  
Address 2453 INAUGUA AVE.  
City-State-Zip: CORAL GABLES FL 33133

Title DIR  
Name MILLER, GORDON MD  
Address 1 GROVE ISLE DRIVE, #206  
City-State-Zip: MIAMI FL 33133

Title DIR  
Name WECHSLER, DEBI  
Address 5299 HAMMOCK DRIVE  
City-State-Zip: CORAL GABLES FL 33156

Title DIR  
Name MCALILEY, CHRIS  
Address 2843 SOUTH BAYSHORE DRIVE  
APT 12C  
City-State-Zip: MIAMI FL 33133

Title DIR  
Name SUMBERG, JOHN ESQ.  
Address C/O BILZIN SUMBERG BAENA PRICE  
& AXELROD, LLP  
200 S. BISCAYNE BLVD., #2500  
City-State-Zip: MIAMI FL 33131

Title DIR  
Name MORERA, RALPH  
Address 60 EDGEWATER DRIVE, APT 14C  
City-State-Zip: CORAL GABLES FL 33133

Title DIR  
Name XENOS, FAITH CFP  
Address C/O SINGER XENOS WEALTH  
MANAGEMENT  
800 DOUGLAS ROAD, SUITE 900  
City-State-Zip: CORAL GABLES FL 33134

Title DIR  
Name MLADENOVIC, MIROSLAV "MISHA"  
Address 5815 SW 68TH STREET  
City-State-Zip: MIAMI FL 33143