

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009033

Entity Name: ONE MIAMI MASTER ASSOCIATION, INC.

Current Principal Place of Business:

335 SOUTH BISCAYNE BLVD,
SUITE 200
MIAMI, FL 33131

Current Mailing Address:

335 SOUTH BISCAYNE BLVD,
SUITE 200
MIAMI, FL 33131 US

FEI Number: 20-3453985

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER AND POLIAKOFF P.A.
121 ALHAMBRA PLAZA, 10TH FLOOR
CORAL GABLES, FL 33134 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 PRESIDENT
Name PARIS, CHRISTOPHE
Address 325 S BISCAYNE BLVD., #1219
City-State-Zip: MIAMI FL 33131

Title VP
Name ABRAVANEL, ODED
Address 325 S BISCAYNE BLVD., #515
City-State-Zip: MIAMI FL 33131

Title T, TREASURER
Name GARCIA, YOVANI
Address 335 S BISCAYNE BLVD., #3001
City-State-Zip: MIAMI FL 33131

Title SECRETARY
Name STERN, RUTH
Address 335 S BISCAYNE BLVD #1812
City-State-Zip: MIAMI FL 33131

Title D
Name NORTON, DAVID
Address 325 S. BISCAYNE BLVD. #921
City-State-Zip: MIAMI FL 33131

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: RUTH STERN

SECRETARY

01/08/2015

Electronic Signature of Signing Officer/Director Detail

Date