

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08179

Entity Name: MIAMI HOMES FOR ALL, INC.**Current Principal Place of Business:**140 WEST FLAGLER
SUITE 105
MIAMI, FL 33130**Current Mailing Address:**140 WEST FLAGLER
SUITE 105
MIAMI, FL 33130 US**FEI Number:** 59-2521237**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**IBARRA, BARBARA
140 WEST FLAGLER
SUITE 105
MIAMI, FL 33130 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:** BARBARA IBARRA

02/01/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name BARROS, MARIA C
Address 2450 SW 27TH LANE
City-State-Zip: MIAMI FL 33133

Title TREASURER
Name BRUNSON, ANTHONY
Address 801 BRICKELL AVE
SUITE 900
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name POWER, BENJI
Address 777 NE 62 ST
APT C500
City-State-Zip: MIAMI FL 33138

Title PRESIDENT
Name BREWSTER, LUTHER DR.
Address 3000 NE 151 STREET
AC1 ROOM 238 NORTH
City-State-Zip: MIAMI FL 33181

Title VP
Name ALOUPIS, VANCE
Address THE CHILDREN'S MOVEMENT OF
FLORIDA
3250 SW THIRD AVE
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name CASTILLA, ANA
Address TD BANK
255 ALHAMBRA CIRCLE
City-State-Zip: CORAL GABLES FL 33134

Title EXECUTIVE DIRECTOR
Name IBARRA, BARBARA
Address 140 WEST FLAGLER
SUITE 105
City-State-Zip: MIAMI FL 33130

Title DIRECTOR
Name AUSTIN, ALISON
Address 1140 NW 58TH 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: BARBARA IBARRA

EXECUTIVE DIRECTOR

02/01/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MAGINLEY, DONNOVAN
Address 801 BRICKELL AVE
SUITE 1050
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name MESA, ADRIAN
Address 5030 BRUNSON DRIVE
UNIVERSITY OF MIAMI - NURSING & HEALTH
STUDIES SUITE 222
City-State-Zip: MIAMI FL 33146

Title DIRECTOR
Name FERNANDEZ, HILDA
Address 16401 NW 37TH AVENUE
ST. THOMAS UNIVERSITY - UNIVERSITY
ADVANCEMENT
City-State-Zip: MIAMI GARDENS FL 33054

Title DIRECTOR
Name THOMPSON, HAROLD
Address 1620 DREXEL AVENUE
MIAMI BEACH COMMUNITY CHURCH
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name COFFEY, TIM
Address 1351 NW 12TH STREET - ROOM 226
11TH JUDICIAL CIRCUIT COURT
ROOM 226
City-State-Zip: MIAMI FL 33125

Title DIRECTOR
Name PROBST, KEVIN
Address 11285 SW 211TH STREET
LEGAL SERVICES OF GREATER
MIAMI SUITE 302
City-State-Zip: MIAMI FL 33189

Title DIRECTOR
Name JONES, WAYNE ANTHONY
Address 1100 WASHINGTON AVENUE
CITY OF MIAMI BEACH POLICE
DEPARTMENT, OPERATIONS
DIVISION
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name HERNANDEZ, INES
Address N/A
CITIBANK COMMUNITY
DEVELOPMENT
City-State-Zip: MIAMI FL