

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000004304

**Entity Name:** MIAMI-BROWARD ONE CARNIVAL HOST COMMITTEE INC.

**FILED**  
**Apr 30, 2015**  
**Secretary of State**  
**CC0219359606**

**Current Principal Place of Business:**

18425 NW 2ND AVNUE  
SUITE # 335  
MIAMI GARDENS, FL 33169

**Current Mailing Address:**

18425 NW 2ND AVENUE  
SUITE # 335  
MIAMI GARDENS, FL 33169

**FEI Number:** 27-0200754

**Certificate of Status Desired:** Yes

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

HILL, MARLON AESQ  
200 S BISCAYNE BLVD SUITE 2750  
MIAMI, FL 33131 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 DIRECTOR  
Name WILLIAMS, RUTHVEN  
Address 18425 NW 2ND AVE SUITE #335  
City-State-Zip: MIAMI GARDENS FL 33169

Title PRESIDENT  
Name HINKSON, JOAN  
Address 18425 NW 2ND AVE SUITE #335  
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR  
Name MOHAMMED, RAFIEK  
Address 7400 NW 36 STREET  
City-State-Zip: LAUDERHILL FL 33319

Title TREASURER  
Name ZAMORA, MARIO  
Address 8004 NW 154 STREET #132  
City-State-Zip: MIAMI LAKES FL 33016

Title VP  
Name BECKFORD, JOHN  
Address 3414 HEATHER TERRACE  
City-State-Zip: LAUDERHILL FL 33319

Title DIRECTOR  
Name SYDNEY, ROBERTS  
Address 18425 NW 2ND AVNUE  
City-State-Zip: MIAMI GARDENS FL 33169

Title SECRETARY  
Name CARTER, KEITH  
Address 730 NW 74TH TERRACE  
City-State-Zip: TAMARAC FL 33063

Title DIRECTOR  
Name D'ARCY, KATHRYN  
Address 122 CROWNE WOODS DRIVE  
City-State-Zip: HOOVER AL 35244

**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:** MARIO ZAMORA

**TREASURER**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name DECRUISE, CARL  
Address 8211 NW 169TH TERRACE  
City-State-Zip: MIAMI LAKES FL 33016

Title ASST. TREASURER  
Name JEANETTE HAYNES  
Address 18425 NW 2ND AVNUE  
SUITE # 335  
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR  
Name ANTHONY JOSEPH  
Address 18425 NW 2ND AVNUE  
SUITE # 335  
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR  
Name RAYMOND LUKE  
Address 18425 NW 2ND AVNUE  
SUITE # 335  
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR  
Name LARSON PHIPPS  
Address 18425 NW 2ND AVNUE  
SUITE # 335  
City-State-Zip: MIAMI GARDENS FL 33169

Title ASST. SECRETARY  
Name GILDA SWASEY  
Address 18425 NW 2ND AVNUE  
SUITE # 335  
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR  
Name FRAZIER, CYNTHIA  
Address 1695 WANNAMAHER AVENUE  
City-State-Zip: SUMMERVILLE SC 29485

Title DIRECTOR  
Name NICHOLAS JACK  
Address 18425 NW 2ND AVNUE  
SUITE # 335  
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR  
Name ASA SEALY  
Address 18425 NW 2ND AVNUE  
SUITE # 335  
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR  
Name DALLAS MICHAEL  
Address 18425 NW 2ND AVNUE  
SUITE # 335  
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR  
Name MARLENE GREGOIRE  
Address 18425 NW 2ND AVNUE  
SUITE # 335  
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR  
Name YVETTE HARRIS  
Address 18425 NW 2ND AVNUE  
SUITE # 335  
City-State-Zip: MIAMI GARDENS FL 33169