2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004304

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

FILED
May 01, 2021
Secretary of State
6479250057CC

Current Principal Place of Business:

18425 NW 2 AVENUE SUITE 435

MIAMI GARDENS, FL 33169

Current Mailing Address:

18425 NW 2ND AVENUE SUITE 435 MIAMI GARDENS, FL 33169 US

FEI Number: 27-0200754 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIAMI GARDENS FL 33169

ASST. TREASURER

HILL, MARLON ESQ 2525 PONCE DE LEON SUITE 700 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: MARLON HILL 05/01/2021

Electronic Signature of Registered Agent Date

Title

City-State-Zip:

MIAMI GARDENS FL 33169

DIRECTOR

Officer/Director Detail:

City-State-Zip:

Title

TitleDIRECTORTitleCHAIRMANNameWILLIAMS, RUTHVENNameHINKSON, JOANAddress18425 NW 2 AVENUEAddress18425 NW 2 AVENUE

SUITE 435 SUITE 435

Name MOHAMMED, RAFIEK Name ZAMORA, MARIO

Address 7400 NW 36 STREET Address 8004 NW 154 STREET #132 City-State-Zip: LAUDERHILL FL 33319 City-State-Zip: MIAMI LAKES FL 33016

Title TREASURER Title VC

NameBECKFORD, JOHNNameSYDNEY, ROBERTSAddress3414 HEATHER TERRACEAddress18425 NW 2 AVE

City-State-Zip: LAUDERHILL FL 33319 City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR Title DIRECTOR

Name DECRUISE, CARL Name JEANETTE HAYNES

Address 8211 NW 169TH TERRACE Address 18425 NW 2 AVENUE

SUITE 435

City-State-Zip: MIAMI LAKES FL 33016 City-State-Zip: MIAMI GARDENS FL 33169

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 DIRECTOR 05/01/2021

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name NICHOLAS JACK Name ANTHONY JOSEPH
Address 18425 NW 2 AVENUE Address 18425 NW 2 AVENUE

SUITE 435 SUITE 435

City-State-Zip: MIAMI GARDENS FL 33169 City-State-Zip: MIAMI GARDENS FL 33169

TitleDIRECTORTitleDIRECTORNameASA SEALYNameRAYMOND LUKE

Address 18425 NW 2 AVENUE Address 18425 NW 2 AVENUE

SUITE 435 SUITE 435

City-State-Zip: MIAMI GARDENS FL 33169 City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR Title DIRECTOR

NameDALLAS MICHAELNameLARSON PHIPPSAddress18425 NW 2 AVENUEAddress18425 NW 2 AVENU

ddress 18425 NW 2 AVENUE Address 18425 NW 2 AVENUE SUITE 435 SUITE 435

City-State-Zip: MIAMI GARDENS FL 33169 City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR Title SECRETARY

Name MARLENE GREGOIRE Name GILDA SWASEY

Address 18425 NW 2 AVENUE Address 18425 NW 2 AVENUE

SUITE 435 SUITE 435

City-State-Zip: MIAMI GARDENS FL 33169 City-State-Zip: MIAMI GARDENS FL 33169

Title ASST. SECRETARY

Name YVETTE HARRIS

City-State-Zip: MIAMI GARDENS FL 33169

18425 NW 2 AVENUE

SUITE 435

Address