#### 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10789

Entity Name: ARTS & BUSINESS COUNCIL OF MIAMI, INC.

**FILED** Jan 23, 2014 **Secretary of State** CC8260681038

# **Current Principal Place of Business:**

2801 FLORIDA AVE.,

SUITE 10

MIAMI, FL 33133

# **Current Mailing Address:**

PO BOX 012100 MIAMI, FL 33101 US

FEI Number: 59-2593330 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

BRUNEY, LAURA 2801 FLORIDA AVENUE SUITE 10 MIAMI, FL 33133 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:

Officer/Director Detail:

**TREASURER** Title **TRUSTEE** Title

WILLIAMS, GAVIN Name GARCIA, RAUL Name

701 BRICKELL AVENUE 2699 SOUTH BAYSHORE DRIVE Address Address

3000

City-State-Zip: MIAMI FL 33133 City-State-Zip: MIAMI FL 33131

Title **TRUSTEE** Title CEO

Name HANKS, RUTH Name BRUNEY, LAURA

1625 S FEDERAL HIGHWAY Address 2801 FLORIDA AVENUE Address 406

FT LAUDERDALE FL 33062

City-State-Zip: City-State-Zip: MIAMI FL 33133

Title **SECRETARY** Title **CHAIRMAN** 

Name PERSON, JENNI Name THOMPSON, JAMES Address **137 NE 19 STREET** 

Address 1300 BISCAYNE BOULEVARD

City-State-Zip: MIAMI FL 33132 City-State-Zip: MIAMI FL 33132

Title **TRUSTEE** Title **TRUSTEE** 

VASQUEZ, AURELIA Name Name KUKURUDZ, ROD 100 CHOPIN PLAZA Address Address 3475 NE 191 ST

MIAMI FL 33131 City-State-Zip: AVENTURA FL 33180 City-State-Zip:

### 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.

01/23/2014 SIGNATURE: LAURA BRUNEY **EXECUTIVE DIRECTOR** 

Date

# Officer/Director Detail Continued:

Title TRUSTEE

Name DANA, HARVEY

Address 4045 SHERIDAN AVENUE

City-State-Zip: MIAMI BEACH FL 33140

Title TRUSTEE

Name EVANS, D. PORPOISE

Address 333 SE 2 AVENUE

4400

City-State-Zip: MIAMI FL 33131

Title TRUSTEE
Name SHERIT, AMY

Address 21355 E DIXIE HWY

106

City-State-Zip: AVENTURA FL 33180

Title TRUSTEE

Name LABOUREAU, SEBASTIEN

Address 1401 NORTH BAY CAUSEWAY

City-State-Zip: NORTH BAY VILLAGE FL 33189

Title TRUSTEE

Name GATTO, SANTIAGO

Address 701 WATERFORD WAY

1000

City-State-Zip: MIAMI FL 33126

Title TRUSTEE

Name GONZALEZ, MANUEL

Address 1103 BRICKELL AVENUE

City-State-Zip: MIAMI FL 33131

Title TRUSTEE

Name CONNOR, ETAIN

Address 125 EDGEWATER DRIVE

City-State-Zip: MIAMI FL 33133