# 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: JAY BRADY

City-State-Zip: MIAMI FL 33015

SERRANO, SOLIDAD

19642 NW 84 PLACE

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# N11000004264

Entity Name: MATER LAKES ACADEMY PTSO CORP

### **Current Principal Place of Business:**

17300 NW 87TH AVENUE PTSO MIAMI, FL 33015

## **Current Mailing Address:**

7879 NW 170TH STREET MIAMI, FL 33015 US

# FEI Number: 80-0741101

### Name and Address of Current Registered Agent:

BRADY, JAY 16391 STONEHAVEN RD MIAMI LAKES, FL 33014 US

FILED Apr 26, 2016 Secretary of State CC7430388305

Certificate of Status Desired: No

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:

Name Address Electronic Signature of Registered Agent

## Officer/Director Detail ·

Officer/Director Detail :			
Title	PRESIDENT	Title	VP
Name	BRADY, JAY	Name	IRIAS, SYLVIA
Address	16391 STONEHAVEN RD	Address	8392 NW 143 RD STREET
City-State-Zip:	MIAMI LAKES FL 33014	City-State-Zip:	MIAMI LAKES FL 33016
Title	S	Title	S
Name	PALOMINO, EVONNE	Name	BUSTAMANTE, MARIA
Address	9920 NW 180TH TERRACE	Address	8325 NW 186 STREET #303
City-State-Zip:	MIAMI GARDENS FL 33055	City-State-Zip:	MIAMI FL 33015
Title	т	Title	SECRETARY
Name	ROMERO, WANDY	Name	BRADY, CAROLINE
Address	7828 NW 194 TERRACE	Address	16391 STONEHAVEN ROAD
City-State-Zip:	HIALEAH FL 33015	City-State-Zip:	MIAMI LAKES FL 33014
Title	SECRETARY		

04/26/2016

PRESIDENT

Date

Date