

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 12, 2021
Secretary of State
7382464173CC

Entity Name: MATER LAKES ACADEMY PTSO CORP

Current Principal Place of Business:

17300 NW 87TH AVENUE
PTSO
MIAMI, FL 33015

Current Mailing Address:

18845 NW 62ND AVE
APT 106
HIALEAH, FL 33015 US

FEI Number: 80-0741101

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VILLAO, PAOLA K.
18845 NW 62ND AVE APT 106
HIALEAH, FL 33015 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: JAY BRADY

01/12/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name VILLAO, PAOLA K.
Address 18845 NW 62ND AVE APT 106
City-State-Zip: HIALEAH FL 33015

Title T
Name GORTAIRE, MARJORIE
Address 3940 NW 168TH ST
City-State-Zip: MIAMI GARDENS FL 33055

Title S
Name MELENDEZ, DARLING
Address 7750 NW 197TH ST
City-State-Zip: HIALEAH FL 33015

Title S
Name RODRIGUEZ, HEYDIS
Address 255 E 34 ST
City-State-Zip: HIALEAH FL 33013

Title S
Name CARRAZANA, JENNY
Address 5022 NW 173RD DRIVE
City-State-Zip: MIAMI FL 33055

Title S
Name ROCHA, PATRICIA
Address 7010 NW 186 ST #505
City-State-Zip: HIALEAH FL 33015

Title VP
Name ESCANIO, YHOVANNA
Address 9042 NW 163TH TERRACE
City-State-Zip: MIAMI FL 33018

Title SECRETARY
Name RIVERA, VERONICA
Address 8881 NW 189TH TERRACE
City-State-Zip: HIALEAH FL 33018

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: PAOLA VILLAO

PRESIDENT

01/12/2021

Electronic Signature of Signing Officer/Director Detail

Date