

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011808

Entity Name: MINDFUL KIDS MIAMI, INC.**Current Principal Place of Business:**7710 SW 61ST AVENUE
SOUTH MIAMI, FL 33143**Current Mailing Address:**7710 SW 61ST AVENUE
SOUTH MIAMI, FL 33143**FEI Number:** 36-4721457**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**YORK-ZIMMERMAN, VALERIE
7710 SW 61ST AVENUE
SOUTH MIAMI, FL 33143 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 PRESIDENT
Name YORK-ZIMMERMAN, VALERIE
Address 7710 SW 61ST AVENUE
City-State-Zip: SOUTH MIAMI FL 33143

Title VP
Name MCKENZIE, LINDA S
Address 6630 S.W. 102 ST.
City-State-Zip: MIAMI FL 33156

Title TREASURER
Name DE LAVALETTE, OLIVIER
Address 5805 SAN VICENTE
City-State-Zip: CORAL GABLES FL 33146

Title SECRETARY
Name CESARANO, MICHAEL
Address 6930 ALMANSIA ST.
 MIAMI, FL 33130
City-State-Zip: MIAMI FL 33146

Title DIRECTOR
Name DAVIES, JOHN
Address 601 N.E. 107 ST.
City-State-Zip: MIAMI FL 33161

Title DIRECTOR
Name DE WITT, VALERIE
Address 7170 S.W. 116 TERRACE
City-State-Zip: MIAMI FL 33156

Title DIRECTOR
Name DOHENY, TESS
Address 915 ALAVA AVE.
City-State-Zip: CORAL GABLES FL 33146

Title DIRECTOR
Name MAGUIRE, KASIA
Address 4305 TOLEDO ST.
City-State-Zip: CORAL GABLES FL 33146

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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: VALERIE YORK-ZIMMERMAN**PRESIDENT****04/06/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LOPEZ-CANTERA, RENEE
Address 7710 S.W. 61ST AVENUE
City-State-Zip: SOUTH MIAMI FL 33143

Title DIRECTOR
Name NOVICKI, TRUDY
Address 7400 SW 135TH STREET
City-State-Zip: PINECREST FL 33156

Title DIRECTOR
Name ROGERS, SCOTT
Address 1311 MILLER DRIVE
SUITE A-212B
City-State-Zip: CORAL GABLES FL 33146

Title DIRECTOR
Name SHOJAEI, MARIA
Address 515 CAUARINA CONCOURSE
City-State-Zip: CORAL GABLES FL 33143

Title DIRECTOR
Name WAAS, DEBORAH
Address 8481 S.W. 147 TERRACE
City-State-Zip: MIAMI FL 33158

Title DIRECTOR
Name LEE, DAVID
Address 7710 S.W. 61ST AVENUE
City-State-Zip: SOUTH MIAMI FL 33143

Title DIRECTOR
Name MEHTA, ASHWIN
Address 900 BISCAYNE BLVD.
#4907
City-State-Zip: MIAMI FL 33132

Title DIRECTOR
Name REISS, IAN
Address ONE GROVE ISLE DRIVE
APT. 1408
City-State-Zip: MIAMI FL 33133

Title DIRECTOR
Name ROJAS, SILVIA
Address 780 NE 69TH ST.
2303
City-State-Zip: MIAMI FL 33138

Title DIRECTOR
Name STERLING, LUEVENIA
Address 1311 MILLER DRIVE
SUITE A-112
City-State-Zip: CORAL GABLES FL 33143

Title DIRECTOR
Name THEROUX, SHARON
Address 7100 W. CAMINO REAL
SUITE 123
City-State-Zip: BOCA RATON FL 33433

Title DIRECTOR
Name STROLENY, SHELLEY
Address 601 SW 29 ROAD
City-State-Zip: MIAMI FL 33129