2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000002700

Entity Name: MIAMI BEACH UNITED, INC.

Current Principal Place of Business:

1125 WASHINGTON AVENUE MIAMI BEACH, FL 33139

Current Mailing Address:

1125 WASHINGTON AVENUE MIAMI BEACH. FL 33139 US

FEI Number: 45-4757086 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GROSS, SAUL 1125 WASHINGTON AVENUE MIAMI BEACH, FL 33139 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: SAUL GROSS 01/20/2015

Electronic Signature of Registered Agent

Date

FILED Jan 20, 2015

Secretary of State

CC9155050019

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR BIENSTOCK, TERRY Name Name FRANK, HERB

2312 BAY AVE Address Address 10 VENETIAN WAY #2201 MIAMI BEACH FL 33139 MIAMI BEACH FL 33140 City-State-Zip: City-State-Zip:

Title PRESIDENT, DIRECTOR Title TREASURER, DIRECTOR Name LIEBMAN, NANCY GROSS, SAUL Name Address 9 ISLAND AVE #408 Address 2900 FLAMINGO DR

City-State-Zip: MIAMI BEACH FL 33139 MIAMI BEACH FL 33140 City-State-Zip:

Title SECRETARY, DIRECTOR Title VP, DIRECTOR

Name MONEY, SANDRA Name HAMMON, MIKE

Address 1521 ALTON ROAD Address 2371 NORTH BAY ROAD #345

MIAMI BEACH FL 33140 City-State-Zip: City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR Title DIRECTOR NEEDLE, MARK Name Name SOSA, HERB Address 910 LENOX AVENUE Address 831 9TH STREET

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

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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.

01/20/2015 SIGNATURE: SAUL GROSS REGISTERED AGENT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name FLOREZ, CHRISTINE

Address 800 WEST AVENUE

238

City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name MOKHA, PAUL

Address 95 SOUTH SHORE DRIVE

City-State-Zip: MIAMI BEACH FL 33141

Title DIRECTOR

Name URSTADT, CHARLES Address 16 ISLAND AVENUE

1A

City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR

Name RITUS, MICHAEL

Address

City-State-Zip: MIAMI BEACH FL 33140

4175 ALTON ROAD

Title DIRECTOR

Name KRAVITZ, ADAM

Address 2982 ALTON ROAD

City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR

Name PASKAL, KIRK

Address 7915 CRESPI BOULEVARD
City-State-Zip: MIAMI BEACH FL 33141

Title DIRECTOR

Name SAMUELIAN, MARK

Address 10 VENETIAN WAY

1502

City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR

Name WIEDER, DAVID

Address 1390 BAY DRIVE

City-State-Zip: MIAMI BEACH FL 33141