

2020 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

01/18/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name FRANK, HERB
Address 10 VENETIAN WAY
2201
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name KRAVITZ, ADAM
Address 2982 ALTON ROAD
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name GONZALEZ, JORGE
Address 3190 ROYAL PALM AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name STARKMAN, RONALD
Address 300 S POINTE DR
2602
City-State-Zip: MIAMI BEACH FL 33139

Title TREASURER, DIRECTOR
Name GROSS, SAUL
Address 2900 FLAMINGO DR
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name PASKAL, KIRK
Address 7915 CRESPI BOULEVARD
4
City-State-Zip: MIAMI BEACH FL 33141

Title DIRECTOR, PRESIDENT
Name BHATT, TANYA
Address 830 RAYMOND ST.
City-State-Zip: MIAMI BEACH FL 33141

Title DIRECTOR
Name BARRAS, RYAN
Address 5750 COLLINS AVE,
16A
City-State-Zip: MIAMI BEACH FL 33140

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.

SIGNATURE: SAUL GROSS

TREASURER

01/18/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, SECRETARY
Name DE CASTRO, HORTENSE
Address 10 VENETIAN WAY
1106
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name LEDDICK, SARAH
Address 4469 ROYAL PALM AVE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name STENDEL, SANDRA
Address 635 85TH STREET
City-State-Zip: MIAMI BEACH FL 33141

Title DIRECTOR
Name MATTEO-SALINAS, MONICA
Address 525 MERIDIAN AVENUE
301
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name JOHNSON, JACK
Address 831 10TH STREET
5
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name NEEDELMAN, SCOTT
Address 1455 DREXEL AVENUE
1
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name DURHAM, GAYLE
Address 1455 WEST AVENUE
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name PACHECO, RAQUEL
Address 732 LENOX AVENUE
B1
City-State-Zip: MIAMI BEACH FL 33139