

2016 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

03/26/2016

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 PRESIDENT, DIRECTOR
Name LIEBMAN, NANCY
Address 9 ISLAND AVE #408
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name NEEDLE, MARK
Address 910 LENOX AVENUE
#4
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR, SECRETARY
Name FLOREZ, CHRISTINE
Address 800 WEST AVENUE
238
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 VP, DIRECTOR
Name HAMMON, MIKE
Address 2371 NORTH BAY ROAD
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name SOSA, HERB
Address 831 9TH STREET
City-State-Zip: MIAMI BEACH FL 33139

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

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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: SAUL GROSS**DIRECTOR**

03/26/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MOKHA, PAUL
Address 95 SOUTH SHORE DRIVE
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 MOUZON, WANDA
Address 744 10TH STREET
111
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name PARKER, JONATHAN
Address 560 W. 51ST STREET
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 RITUS, MICHAEL
Address 4175 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 KILROY, STACY
Address 1800 PURDY AVE, 1407
City-State-Zip: MIAMI BEACH FL 33139