## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000000532

Entity Name: THE DORAL BAR ASSOCIATION, INC

**Current Principal Place of Business:** 

11102 NW 83RD ST **APT 230** 

DORAL, FL 33178-1742

**Current Mailing Address:** 

11102 NW 83RD ST **APT 230** 

DORAL, FL 33178-1742 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VALDEZ, LUIS ALBERTO 11102 NW 83RD ST **APT 230** DORAL, FL 33178-1742 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: LUIS ALBERTO VALDEZ 04/15/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title DIRECTOR

Name VALDEZ, LUIS ALBERTO Name SNYDER, LESLIE I

11102 NW 83RD ST 4000 PONCE DE LEON BLVD. Address Address

**APT 230** 

CORAL GABLES FL 33146 City-State-Zip: City-State-Zip: DORAL FL 33178-1742

**DIRECTOR** Title Title **DIRECTOR** 

Name VIVAS, ALEX M Name EVANGILISTA, ZACHARIAH

Address 5717 NW 88TH TERR. 2100 PONCE DE LEON BLVD Address

City-State-Zip: MIAMI FL 33178 **SUIT 1180** 

City-State-Zip: CORAL GABLES FL 33134 Title **DIRECTOR** 

**SECRETARY** PETKOVICH, IVETTE Title Name

LOPEZ, SHIRLEY Name Address 8200 NW 41 STREET

SUITE 200 Address

13876 SW 56 STREET DORAL FL 33166 City-State-Zip:

**STE 200** City-State-Zip: MIAMI FL 33175

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.

04/15/2024 SIGNATURE: LUIS ALBERTO VALDEZ **PRESIDENT** 

**FILED** Apr 15, 2024

**Secretary of State** 

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