

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000004760

**FILED**  
**Feb 06, 2017**  
**Secretary of State**  
**CC4137084001**

**Entity Name:** DOWNTOWN NEIGHBORS ALLIANCE, INC.

**Current Principal Place of Business:**

ROSA M DE LA CAMARA, ESQ.  
121 ALHAMBRA PLAZA, 10TH FL  
CORAL GABLES, FL 33134

**Current Mailing Address:**

ROSA M DE LA CAMARA, ESQ.  
121 ALHAMBRA PLAZA, 10TH FL  
CORAL GABLES, FL 33134

**FEI Number:** 47-1315285

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DE LA CAMARA, ROSA M ESQ  
121 ALHAMBRA PLAZA, 10TH FL  
CORAL GABLES, FL 33134 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            KABBANI, AMAL SOLH  
Address        121 ALHAMBRA PLAZA, 10TH FL  
City-State-Zip: CORAL GABLES FL 33134

Title            SECRETARY  
Name            PISANA, PASQUALE  
Address        121 ALHAMBRA PLAZA, 10TH FL  
City-State-Zip: CORAL GABLES FL 33134

Title            TREASURER  
Name            BENOSH, ITAI  
Address        121 ALHAMBRA PLAZA, 10TH FL  
City-State-Zip: CORAL GABLES FL 33134

Title            DIRECTOR  
Name            PALOMO, CRISTINA  
Address        121 ALHAMBRA PLAZA, 10TH FL  
City-State-Zip: CORAL GABLES FL 33134

Title            VP  
Name            NORTON, DAVID  
Address        121 ALHAMBRA PLAZA, 10TH FL  
City-State-Zip: CORAL GABLES FL 33134

*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:** AMAL SOLH KABBANI

**PRESIDENT**

**02/06/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date