

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000007110

**Entity Name:** MIAMI MEDITATION CENTER, INC

**Current Principal Place of Business:**

260 CRANDON BLVD  
#6  
KEY BISCAYNE, FL 33149

**FILED**  
**Mar 11, 2020**  
**Secretary of State**  
**6249114119CC**

**Current Mailing Address:**

260 CRANDON BLVD  
#6  
KEY BISCAYNE, FL 33149 US

**FEI Number: 81-2548592**

**Certificate of Status Desired: No**

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

HOFFIMAN & HOFFMAN, PA  
848 BRICKELL AVE - STE. 810  
MIAMI, FL 33131 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 P  
Name DURHAM, WILLIAM F  
Address 230 SEA VIEW DR  
City-State-Zip: KEY BISCAYNE FL 33149

Title D  
Name SCHIMEL, ALEX  
Address 260 CRANDON BLVD  
#6  
City-State-Zip: KEY BISCAYNE FL 33149

Title D  
Name WILSON, WILLAM SCOTT  
Address 6291 SW 57 ST  
City-State-Zip: SOUTH MIAMI FL 33143

Title D  
Name WENGER, NATACHA  
Address 260 CRANDON BLVD  
#6  
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR  
Name CUONO, MARCO  
Address 260 CRANDON BLVD  
#6  
City-State-Zip: KEY BISCAYNE FL 33149

*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: WILLIAM F. DURHAM**

**PR**

**03/11/2020**

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

\_\_\_\_\_  
Date