## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000009870

Entity Name: 4WARD MIAMI, INC.

**Current Principal Place of Business:** 

**421 NE 51 STREET** 

MIAMI. FL 33137

**Current Mailing Address:** 

**421 NE 51 STREET** MIAMI, FL 33137 US

FEI Number: 47-4438607 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED CORPORATE SERVICES LLC 421 NE 51 STREET MIAMI, FL 33137 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: REGISTERED CORPORATE SERVICES LLC

02/10/2020

**FILED** Feb 10, 2020

**Secretary of State** 

4076817260CC

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Title D

COLYER, JACQUI FERNANDEZ, ALEXIS Name Name **295 NE 82 STREET** Address Address 880 NE 69 STREET

MIAMI FL 33138 City-State-Zip: City-State-Zip: MIAMI FL 33138

Title D

Title PARDO, DAMIAN Name

Name ANDREWS, GEORGE Address **421 NE 51 STREET** 782 NE 75TH STREET Address

City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI FL 33138

Title D

D DUBERLI, FRANCESCO Name Name DIAZ. SONIA

Address 1111 BRICKELL BAY DRIVE Address 5653 SW 6TH STREET

PH3301

City-State-Zip: MIAMI FL 33134 City-State-Zip: MIAMI FL 33131

Title Title D

Name DE LA HUERTA, CHRISTIAN Name BEC. RICHARD Address 2143 S. BAYSHORE DRIVE Address 12800 NE 5TH AVENUE

MIAMI FL 33131 City-State-Zip: City-State-Zip: NORTH MIAMI FL 33161

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.

Title

02/10/2020 SIGNATURE: DAMIAN PARDO **CHAIR** 

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title D Title D

Name MARIN, JOENNY Name CASANAS, JONATHAN

Address 1302 SW 147TH TERRACE Address 600 NE 25TH STREET

City-State-Zip: PEMBROKE PINES FL 33027 #52

City-State-Zip: MIAMI FL 33137