

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000001985

**Entity Name:** MIAMI BLACK HISTORY MUSEUM, INC.

**Current Principal Place of Business:**

1450 BRICKELL AVENUE, 23RD FLOOR  
MIAMI, FL 33131

**Current Mailing Address:**

1450 BRICKELL AVENUE, 23RD FLOOR  
MIAMI, FL 33131 US

**FEI Number:** 92-0983145

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 D  
Name DOTSON, ALBERT E JR.  
Address 1450 BRICKELL AVENUE, 23RD  
FLOOR  
City-State-Zip: MIAMI FL 33131

Title D  
Name MOSS, DENNIS C  
Address 1450 BRICKELL AVENUE, 23RD  
FLOOR  
City-State-Zip: MIAMI FL 33131

Title D  
Name DAVIS-RAIFORD, LUCIA  
Address 4000 NW 142ND STREET  
City-State-Zip: OPA LOCKA FL 33054

*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:** ALBERT E. DOTSON, JR.

**DIRECTOR**

**02/06/2023**

Electronic Signature of Signing Officer/Director Detail

Date