

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000006955

Entity Name: IMMIGRATION DEFENSE BAR ASSOCIATION, INC.**Current Principal Place of Business:**2828 CORAL WAY, SUITE 540
MIAMI, FL 33145**Current Mailing Address:**2828 CORAL WAY, SUITE 540
MIAMI, FL 33145 US**FEI Number:** 87-1139858**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JUAN CARLOS GOMEZ
2828 CORAL WAY, SUITE 540
MIAMI, FL 33145 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 ANA MARIA CANDELA
Address 2730 SW 3RD AVE, SUITE 501
City-State-Zip: MIAMI FL 33129

Title CHAIRMAN, DIRECTOR
Name GOMEZ, JUAN C
Address 2828 CORAL WAY, SUITE 540
City-State-Zip: MIAMI FL 33145

Title D
Name ORTIZ, MICHELLE
Address 6355 NW 36TH STREET, SUITE 2201
City-State-Zip: MIAMI FL 33166

Title D
Name PRADA, MARK A.
Address 3191 CORAL WAY,
SUITE 500
City-State-Zip: MIAMI FL 33145

Title VICE CHAIR, DIRECTOR
Name CHERFRERE, SANDRA
Address 9628 NE 2ND AVENUE, SUITE A9
City-State-Zip: MIAMI SHORES FL 33138

Title D
Name HERNANDEZ, PATRICIA
Address 10691 N. KENDALL DRIVE, SUITE 210
City-State-Zip: MIAMI FL 33176

Title D
Name PORRAS, MAUREEN L
Address 1924 NW 84TH AVE
City-State-Zip: MIAMI FL 33126

Title D, SECRETARY
Name RILO, NORA M.
Address 2001 N.W. 107 AVENUE
SUITE 230
City-State-Zip: MIAMI FL 33172

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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: JUAN CARLOS GOMEZ

CHAIRMAN/DIRECTOR

04/29/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name ROMERO-CRAFT, KIRA
Address 523 WEST COLONIAL DRIVE
City-State-Zip: ORLANDO FL 32804

Title D
Name SOLOMIANY, ALEX
Address 999 BRICKELL AVENUE,
SUITE 1102
City-State-Zip: MIAMI FL 33131

Title D, TREASURER
Name SANCHEZ-ROIG, REBECA
Address 168 SW 1ST STREET,
SUITE 800
City-State-Zip: MIAMI FL 33131

Title D
Name ZEQUEIRA, MARIA S.
Address 900 SE OCEAN BLVD.,
SUITE 212B
City-State-Zip: STUART FL 34994