

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

DOCUMENT# N21000012542

**Entity Name:** MIAMI STINGS BASEBALL BOOSTER CLUB, INC.

**Current Principal Place of Business:**

2450 SW 1ST STREET  
MIAMI, FL 33135

**Current Mailing Address:**

2450 SW 1ST STREET  
MIAMI, FL 33135 US

**FEI Number: 87-3319086**

**Certificate of Status Desired: No**

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

BONILLA, EDWIN  
7661 HAMPTON BLVD.  
NORTH LAUDERDALE, FL 33068 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            ACOSTA, ODALYS  
Address        2164 SW 11 ST.  
City-State-Zip: MIAMI FL 33135

Title            VP  
Name            MONTANO, MARIA  
Address        2910 SW 24TH TER  
City-State-Zip: MIAMI FL 33145

Title            TREASURER  
Name            MESA, SWANEE  
Address        20322 NW 42ND CT.  
City-State-Zip: MIAMI GARDENS FL 33055

Title            SECRETARY  
Name            LLOVET, AMANDA  
Address        1285 SW 19TH TER  
City-State-Zip: MIAMI FL 33145

Title            SECRETARY  
Name            BELLO DE ARRIAZA, EILEEN  
Address        1269 SW 21 ST.  
City-State-Zip: MIAMI FL 33145

*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: AMANDA LLOVET**

**SECRETARY**

**04/14/2023**

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

\_\_\_\_\_  
Date