

**2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N23100

**Entity Name:** VILLAGE OF DORAL DUNES ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O MIAMI MANAGEMENT, INC.  
14275 SW 142 AVE  
MIAMI, FL 33186

**Current Mailing Address:**

C/O MIAMI MANAGEMENT, INC.  
14275 SW 142 AVE  
MIAMI, FL 33186 US

**FEI Number:** 66-0052606

**Certificate of Status Desired:** No

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

ZACIEWSKI, SHAUN M.  
175 SW 7TH STREET  
SUITE 1611  
MIAMI, FL 33130 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:** SHAUN M. ZACIEWSKI, ESQ.

02/22/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ALVAREZ, RAFAEL ALBERTO  
Address        C/O MIAMI MANAGEMENT, INC.  
                  14275 SW 142 AVE  
City-State-Zip: MIAMI FL 33186

Title            VICE PRESIDENT  
Name            SCHREIBMAIER, EMANUEL  
Address        C/O MIAMI MANAGEMENT, INC.  
                  14275 SW 142 AVE  
City-State-Zip: MIAMI FL 33186

Title            SECRETARY AND TREASURER  
Name            BERENBLUM, ALBERTO  
Address        C/O MIAMI MANAGEMENT, INC.  
                  14275 SW 142 AVE  
City-State-Zip: MIAMI FL 33186

Title            DIRECTOR  
Name            DONADIO, CLAUDIA  
Address        C/O MIAMI MANAGEMENT, INC.  
                  14275 SW 142 AVE  
City-State-Zip: MIAMI FL 33186

Title            DIRECTOR  
Name            GUERRERO, CRISTOPHER  
Address        C/O MIAMI MANAGEMENT, INC.  
                  14275 SW 142 AVE  
City-State-Zip: MIAMI FL 33186

*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:** ALVAREZ, RAFAEL ALBERTO

PRESIDENT

02/22/2022

Electronic Signature of Signing Officer/Director Detail

Date