

2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N23100

Entity Name: VILLAGE OF DORAL DUNES ASSOCIATION, INC.

FILED
Oct 25, 2021
Secretary of State
9603143641CC

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:

BECKER &, POLIAKOFF
121 ALHAMBRA PLAZA
10TH FLOOR
CORAL GABLES, FL 33134 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: BECKER & POLIAKOFF

10/25/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HERRERA, MARIA CAROLINA
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 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 SECRETARY
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: HERRERA , MARIA CAROLINA

PRESIDENT

10/25/2021

Electronic Signature of Signing Officer/Director Detail

Date