2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23100

Entity Name: VILLAGE OF DORAL DUNES ASSOCIATION, INC.

FILED Jan 13, 2022 **Secretary of State** 5581170776CC

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 01/13/2022

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title VICE PRESIDENT

Name HERRERA, MARIA CAROLINA Name SCHREIBMAIER, EMANUEL

C/O MIAMI MANAGEMENT, INC. C/O MIAMI MANAGEMENT, INC. Address Address

14275 SW 142 AVE 14275 SW 142 AVE

City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33186

Title **SECRETARY** Title **DIRECTOR**

Name BERENBLUM, ALBERTO Name DONADIO, CLAUDIA

Address C/O MIAMI MANAGEMENT, INC. Address C/O MIAMI MANAGEMENT, INC.

14275 SW 142 AVE 14275 SW 142 AVE MIAMI FL 33186 City-State-Zip: MIAMI FL 33186

City-State-Zip:

Title DIRECTOR

GUERRERO, CRISTOPHER Name 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.

01/13/2022 SIGNATURE: MARIA CAROLINA HERRERA **PRESIDENT**