

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

DOCUMENT# N26546

**Entity Name:** PARENT TO PARENT OF MIAMI, INC.

**Current Principal Place of Business:**

7990 SW 117TH AVE  
# 200  
MIAMI, FL 33183

**Current Mailing Address:**

7990 SW 117TH AVE  
# 200  
MIAMI, FL 33183 US

**FEI Number:** 65-0022052

**Certificate of Status Desired:** Yes

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

GARCIA, FARIDES  
825 CREMONA AVENUE  
CORAL GABLES, FL 33146 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:** FARIDES GARCIA

01/24/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           SALVO, MARIA  
Address        13218 SW 87 TERRACE  
City-State-Zip: MIAMI FL 33183

Title           PRESIDENT, CEO  
Name           GARCIA, FARIDES  
Address        825 CREMONA AVENUE  
City-State-Zip: CORAL GABLES FL 33146

Title           CHAIRMAN  
Name           BONET, MADAY  
Address        14233 SW 134 COURT  
City-State-Zip: MIAMI FL 33186

Title           VC  
Name           BRUGUERA, RICHARD  
Address        7661 SW 169TH STREET  
City-State-Zip: PALMETTO BAY FL 33157

Title           TRUSTEE  
Name           BLOOM, SARA  
Address        8107 SW 72 AVE, #102  
City-State-Zip: MIAMI FL 33143

*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:** FARIDES GARCIA

PRESIDENT, CEO

01/24/2023

Electronic Signature of Signing Officer/Director Detail

Date