2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000799

Entity Name: THE I HAVE A DREAM FOUNDATION OF MIAMI, INC.

FILED Apr 18, 2024 **Secretary of State** 9349443575CC

Current Principal Place of Business:

C/O STEPHANIE TRUMP 17749 COLLINS AVENUE, TS40 SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

STEPHANIE TRUMP 17749 COLLINS AVENUE TS40 SUNNY ISLES, FL 33160 US

FEI Number: 65-0570404 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BILZIN, BRIAN BILZIN SUMBERG 1450 BRICKELL AVENUE 2300 MIAMI, FL 33131 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: BRIAN BILZIN 04/18/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title

Title **PRESIDENT** Title DIRECTOR Name TRUMP, STEPHANIE Name BILZIN, BRIAN

17749 COLLINS AVENUE 200 S. BISCAYNE BLVD Address Address

TS40 2500

City-State-Zip: SUNNY ISLES FL 33160 City-State-Zip: MIAMI FL 33131

Title DIRECTOR Title DIRECTOR Name LITSKY, BEVERLY Name BLACK, ELAINE

Address 3000 ISLAND BLVD Address **671 SW 93 AVENUE**

City-State-Zip: PEMBROKE PINES FL 33025 City-State-Zip: WILLIAMS ISLAND FL 33160

Title DIRECTOR DIRECTOR

Name MADURO, LESLIE ANN ROBERTSON, JOHNATHAN Name Address 777 BRICKELL AVENUE

1105 S RIO VISTA BLVD Address 3RD FLOOR

MIAMI FL 33131 City-State-Zip: FT. LAUDERDALE FL 33316 City-State-Zip:

Title DIRECTOR Title DIRECTOR ROBERTS, OTI Name Name BOUCHER, MICHAEL

2 SOUTH BISCAYNE BLVD Address Address 1451 OCEAN DRIVE

3RD FLOOR

MIAMI FL 33131 City-State-Zip: City-State-Zip: MIAMI BEACH FL 33139

Continues on page 2

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.

04/18/2024 SIGNATURE: STEPHANIE TRUMP **PRESIDENT**

Officer/Director Detail Continued:

DIRECTOR Title Title **DIRECTOR** HOLLANDER, ROBERT ZUTEL, FRED Name Name

Address 14900 NW 79TH COURT Address 1111 BRICKELL AVE 2700

200

City-State-Zip:

City-State-Zip: MIAMI LAKES FL 33016 City-State-Zip: MIAMI FL 33131

DIRECTOR Title Title **DIRECTOR**

Name BREDEMEYER, FRED Name LINGARD, SINACA

Address 12000 BISCAYNE BLVD Address 19999 W COUNTRY CLUB DR

SUITE 707 City-State-Zip: AVENTURA FL 33180

MIAMI FL 33181 City-State-Zip:

Title **DIRECTOR** Title DIRECTOR Name WEISMAN, ENID WARD, GREG Name

Address 3802 NE 207TH ST 17901 COLLINS AVE Address **APT 601**

City-State-Zip: AVENTURA FL 33180 City-State-Zip: SUNNY ISLES BEACH FL 33160

Title **OFFICER** Title DIRECTOR

Name GABART, STANLEY Name SEVERE, JONAS

Address 2851 PROSPECT ROAD Address 17901 COLLINS AVE

UNIT 406

City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip: FORT LAUDERDALE FL 33309

OFFICER Title Title **DIRECTOR**

TAYLOR, NICOLE Name LEVIN, JOANNE Name

4164 INVERRARY DRIVE Address 4000 ISLAND BLVD. Address

APT 506 LAUDERHILL FL 33319

City-State-Zip: AVENTURA FL 33160

Title **DIRECTOR** Title **DIRECTOR**

Name GONZALEZ, LUIS Name MARTINEZ-WARD, JANY Address 795 W 49 ST Address 17901 COLLINS AVE

City-State-Zip: HIALEAH FL 33012 SUNNY ISLES FL 33160 City-State-Zip: