2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000799

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

FILED Feb 08, 2019 Secretary of State 3551063443CC

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 02/08/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title D Title D

Name TRUMP, STEPHANIE Name TRUMP, EDDIE

Address 17749 COLLINS AVENUE Address 17875 COLLINS AVENUE

TS40 503B

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

Title D Title OFFICER

Name BILZIN, BRIAN Name LITSKY, BEVERLY

Address 1450 BRICKELL AVENUE Address 3000 ISLAND BLVD

2300

City-State-Zip: MIAMI BEACH FL 33131 City-State-Zip: WILLIAMS ISLAND FL 33160

Title OFFICER Title OFFICER

Name HUMES-NEWBOLD, EDITH Name BLACK, ELAINE

Address 200 S. BISCAYNE BLVD Address 671 SW 93 AVENUE

2500

City-State-Zip: MIAMI FL 33131

Title OFFICER

Name ROBERTSON, JOHNATHAN Name MADURO, LESLIE ANN

Address 777 BRICKELL AVENUE
Address 1105 S RIO VISTA BLVD 3RD FI OOR

5KB 1 200K

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

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.

SIGNATURE: STEPHANIE TRUMP DIRECTOR 02/08/2019

Officer/Director Detail Continued:

OFFICER Title Title **OFFICER** Name BOUCHER, MICHAEL Name ROBERTS, OTI

Address 1451 OCEAN DRIVE Address 2 SOUTH BISCAYNE BLVD

3RD FLOOR

205

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

Title **OFFICER** Title **OFFICER**

HOLLANDER, ROBERT Name COSBY, JEFFREY Name Address 14900 NW 79TH COURT Address 200 S BISCAYNE BLVD

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

Title **OFFICER OFFICER** Title

Name ZUTEL, FRED Name STEELE, ADDEA

Address 1450 BRICKELL AVENUE Address 2800 ISLAND BLVD

SUITE #1600

1801 City-State-Zip: MIAMI FL 33131 City-State-Zip: WILLIAMS ISLAND FL 33160