2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N96000005466

Entity Name: CITY OF NORTH MIAMI EMPLOYEES' ASSISTANCE TRUST

FUND, INC.

Current Principal Place of Business:

CITY OF NORTH MIAMI 776 NE 125 STREET 4TH FLOOR NORTH MIAMI, FL 33161

Current Mailing Address:

CITY OF NORTH MIAMI C/O ANDREA MCDONALD 776 NE 125 STREET NORTH MIAMI, FL 33161 US

FEI Number: 65-0758530 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORTH MIAMI CITY ATTORNEY'S OFFICE 776 NE 125 STREET NORTH MIAMI, FL 33161 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:

City-State-Zip:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title P Title

Name GARCIA, CARLOS Name PAYNE, DARRELL

Address C/O CITY OF NORTH MIAMI Address C/O CITY OF NORTH MIAMI

776 NE 125 STREET 776 NE 125 STREET

City-State-Zip: NORTH MIAMI FL 33161 City-State-Zip: NORTH MIAMI FL 33161

Title SECRETARY Title DIRECTOR

Name LEE, BRENDA L Name SANZETENEA, DUNIA L

Address C/O CITY OF NORTH MIAMI Address C/O CITY OF NORTH MIAMI

776 NE 125 STREET 776 NE 125 STREET

City-State-Zip:

NORTH MIAMI FL 33161

Title ASST. TREASURER
Name ALABRE, MACDEUR

Address C/O CITY OF NORTH MIAMI

NORTH MIAMI FL 33161

776 NE 125TH STREET, 4TH FLOOR

City-State-Zip: NORTH MIAMI FL 33161

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: MACDEUR ALABRE ASST. TREASURER 02/24/2021

Date

FILED

Feb 24, 2021

Secretary of State 0299298639CC