

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90243 037 ****61.25

DOCUMENT # N06170

1. Entity Name
MIAMI BEACH ASSOCIATION FOR THE GIFTED, INC.



Principal Place of Business
4100 PRAIRE AVENUE
MIAMI BEACH, FL 33140

Mailing Address
4100 PRAIRE AVENUE
MIAMI BEACH, FL 33140

14008964



01272005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2490580	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SUAREZ, LILANA
4100 PRAIRE AVENUE
MIAMI BEACH, FL 33140

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARIA ISLESIAS - RAMESAR 4100 PRAIRE AVENUE MIAMI BEACH, FL 33140 (D) (President)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Solange Perez 4100 PRAIRE AVENUE MIAMI BEACH, FL 33140 (V.P.) (D)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JACKIE Blacher 4100 PRAIRE AVENUE MIAMI BEACH, FL 33140 (V.P.) (D)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BARBARA GELBER 4100 PRAIRE AVENUE MIAMI BEACH, FL 33140 (V.P.) (D)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HERNANDEZ, LEONOR 4100 PRAIRE AVENUE MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Stefanie Grife (A) 4100 PRAIRE AVENUE MIAMI BEACH, FL 33140 (Secretary)

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Maria Ramesar
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/05 305-776-3829
Date Daytime Phone #

MARIA ISLESIAS - RAMESAR PRESIDENT

ATTACHMENT
14.008964

MIAMI BEACH ASSOCIATION FOR THE GIFTED, INC.
DOCUMENT NO. N06170

2005 OFFICERS & DIRECTORS

MARIA IGLESIAS-RAMESAR	PRESIDENT/DIRECTOR
SOLANGE PEREZ	V.P./DIRECTOR
JACKIE BLACHER	V.P./DIRECTOR
BARBARA GELBER	V.P./DIRECTOR
LEONOR HERNANDEZ	TREASURER/DIRECTOR
STEFANIE GRIFE	SECRETARY/DIRECTOR