

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704866

Entity Name: MIAMI COUNCIL FOR INTERNATIONAL VISITORS,INC.**Current Principal Place of Business:**2850 S DOUGLAS ROAD
SUITE 201
CORAL GABLES, FL 33134**Current Mailing Address:**2850 S DOUGLAS ROAD
SUITE 201
CORAL GABLES, FL 33134 US**FEI Number:** 59-6153212**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALVAREZ, ANNETTE G
2850 S DOUGLAS ROAD
SUITE 201
CORAL GABLES, FL 33134 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	TREASURER
Name	RICE, THERESA
Address	2850 S DOUGLAS ROAD SUITE 305
City-State-Zip:	CORAL GABLES FL 33134

Title	DIRECTOR
Name	ALVAREZ, ANNETTE G
Address	2850 S DOUGLAS ROAD SUITE 305
City-State-Zip:	CORAL GABLES FL 33134

Title	PRESIDENT
Name	JUNGE, BARBARA
Address	2850 S DOUGLAS ROAD SUITE 305
City-State-Zip:	CORAL GABLES FL 33134

Title	VP
Name	PASSERA, ATHENA
Address	2850 S DOUGLAS ROAD SUITE 305
City-State-Zip:	CORAL GABLES FL 33134

Title	DIRECTOR
Name	ROWE, LESLIE
Address	2850 S DOUGLAS ROAD SUITE 201
City-State-Zip:	CORAL GABLES FL 33134

Title	DIRECTOR
Name	TREASTER, JOSEPH
Address	2850 S DOUGLAS ROAD SUITE 201
City-State-Zip:	CORAL GABLES FL 33134

Title	DIRECTOR
Name	LAVERNIA, CARYN
Address	2850 S DOUGLAS ROAD SUITE 201
City-State-Zip:	CORAL GABLES FL 33134

Title	DIRECTOR
Name	OATES, ELIZABETH
Address	2850 S DOUGLAS ROAD SUITE 201
City-State-Zip:	CORAL GABLES FL 33134

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: ANNETTE G. ALVAREZ**EXECUTIVE DIRECTOR****04/30/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date