

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739337

**Entity Name:** DOWNTOWN MIAMI PARTNERSHIP, INC.

**Current Principal Place of Business:**

25 S.E. SECOND AVENUE  
#240  
MIAMI, FL 33131

**FILED**  
**Feb 06, 2013**  
**Secretary of State**  
**CC8534506847**

**Current Mailing Address:**

25 S.E. SECOND AVENUE  
#240  
MIAMI, FL 33131 US

**FEI Number: 59-1743641**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

PADILLA, EDDIE EXECDIR  
25 SE 2 AVE  
#240  
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: EDDIE PADILLA**

**02/06/2013**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name COCHRAN, TRACY  
Address 2720 CORAL WAY  
City-State-Zip: MIAMI FL 33145

Title S  
Name ALONSO, RANDALL  
Address 200 E. FLAGLER STREET  
City-State-Zip: MIAMI FL 33131

Title V  
Name PAMELA, WELLER  
Address 401 BISCAYNE BOULEVARD  
City-State-Zip: MIAMI FL 33132

Title D  
Name OLIVEIRA, HORACIO  
Address 68 W FLAGLER ST  
City-State-Zip: MIAMI FL 33130

Title P  
Name RESSLER, GARY  
Address 169 E FLAGLER ST. #PENTHOUSE  
City-State-Zip: MIAMI FL 33131

Title D  
Name GERRY, GUARCH  
Address 300 NE 2 AVE 5TH FLOOR  
1510  
City-State-Zip: MIAMI FL 33132

*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: TRACY COCHRAN**

**TREASURER**

**02/06/2013**

Electronic Signature of Signing Officer/Director Detail

Date