

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760583

FILED
Jan 21, 2020
Secretary of State
8599931261CC

Entity Name: SFPBS FOUNDATION, INC.

Current Principal Place of Business:

14901 NE 20TH AVENUE
MIAMI, FL 33181-1121

Current Mailing Address:

C/O DOLORES SUKHDEO
P.O. BOX 610002
MIAMI, FL 33261-0002 US

FEI Number: 59-2141826

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUKHDEO, DOLORES
14901 NE 20TH AVE.
MIAMI, FL 33181-1121 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: DOLORES SUKHDEO

01/21/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name SUKHDEO, DOLORES
Address 14901 NE 20TH AVE
City-State-Zip: MIAMI FL 33181

Title CFO
Name OLMO, PAMELA
Address 14901 NE 20TH AVE
City-State-Zip: MIAMI FL 33181

Title SECRETARY
Name SOCIAS, PEGGY
Address 14901 NE 20TH AVE
City-State-Zip: MIAMI FL 33181

Title DIRECTOR
Name SILVERS, LAURIE
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name BERMONT, PETER L
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name BOLOTIN, IRVING
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name DIMARE, PAUL J SR.
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name GOLDMAN, HARVEY A
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

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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: PAMELA OLMO

CFO

01/21/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PRATHER, DAVID C
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title CHAIRMAN
Name KESSLER, MICHELE
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name JAFFE, DAVID L
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name VECELLIO, KATHRYN
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121