2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760583

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: 47-5661447 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 03/06/2018

Electronic Signature of Registered Agent

Officer/Director Detail:

Title CEO Title CFO

 Name
 SUKHDEO, DOLORES
 Name
 OLMO, PAMELA

 Address
 14901 NE 20TH AVE
 Address
 14901 NE 20TH AVE

 City-State-Zip:
 MIAMI FL 33181
 City-State-Zip: MIAMI FL 33181

Title SECRETARY Title DIRECTOR

Name SOCIAS, PEGGY Name SILVERS, LAURIE

 Address
 14901 NE 20TH AVE
 Address
 14901 NE 20TH AVENUE

 City-State-Zip:
 MIAMI FL 33181
 City-State-Zip:
 MIAMI FL 33181-1121

Title DIRECTOR Title DIRECTOR

Name BERMONT, PETER L Name BOLOTIN, IRVING

Address 14901 NE 20TH AVENUE Address 14901 NE 20TH AVENUE

City-State-Zip: MIAMI FL 33181-1121 City-State-Zip: MIAMI FL 33181-1121

Title CHAIRMAN Title DIRECTOR

Name BATMASIAN, MARTA A Name FRIEDMAN, BERNIE

Address 14901 NE 20TH AVENUE Address 14901 NE 20TH AVENUE

City State Zip: MIAMLEL 33181 1121

City State Zip: MIAMLEL 33181 1121

City-State-Zip: MIAMI FL 33181-1121 City-State-Zip: MIAMI FL 33181-112

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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 03/06/2018

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 06, 2018

Secretary of State

CC4991759243

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameDIMARE, PAUL J SR.NameGOLDMAN, HARVEY AAddress14901 NE 20TH AVENUEAddress14901 NE 20TH AVENUECity-State-Zip:MIAMI FL 33181-1121City-State-Zip:MIAMI FL 33181-1121

Title DIRECTOR Title DIRECTOR

NameGORDON, KENNETH ANamePRATHER, DAVID CAddress14901 NE 20TH AVENUEAddress14901 NE 20TH AVENUECity-State-Zip:MIAMI FL 33181-1121City-State-Zip:MIAMI FL 33181-1121

Title DIRECTOR Title DIRECTOR

NameJAFFE, DAVID LNameKESSLER, MICHELEAddress14901 NE 20TH AVENUEAddress14901 NE 20TH AVENUECity-State-Zip:MIAMI FL 33181-1121City-State-Zip:MIAMI FL 33181-1121