

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000001406

**Entity Name:** MARGAUX'S MIRACLE FOUNDATION, INC.

**Current Principal Place of Business:**

2601 NW 29TH DR  
BOCA RATON, FL 33434

**Current Mailing Address:**

2601 NW 29TH DR  
BOCA RATON, FL 33434

**FEI Number: 04-3643503**

**Certificate of Status Desired: Yes**

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

ROTH, NEAL ESQ.  
GROSSMAN AND ROTH, P.A.  
2525 PONCE DE LEON BLVD  
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: NEAL ROTH**

**03/07/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DR  
Name KALLOS, NILZA MD  
Address 6280 SUNSET DRIVE SUITE 603  
City-State-Zip: MIAMI FL 33143

Title DR  
Name KALSTONE, CHARLES MD  
Address 6141 SUNSET DRIVE SUITE 401  
City-State-Zip: MIAMI FL 33143

Title ED  
Name RUTTENBERG, ROCHELLE G  
Address 2601 NW 29TH DRIVE  
City-State-Zip: BOCA RATON FL 33434

Title TREASURER  
Name RUTTENBERG, SHARON  
Address 2601 NW 29TH DRIVE  
City-State-Zip: BOCA RATON FL 33434

Title C  
Name GROSSMAN, STUART  
Address 2525 PONCE DE LEON  
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: ROCHELLE G RUTTENBERG**

**EXECUTIVE DIRECTOR**

**03/07/2022**

Electronic Signature of Signing Officer/Director Detail

Date