

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02993

Entity Name: SOUTH FLORIDA ART CENTER, INC.

Current Principal Place of Business:

924 LINCOLN RD
205
MIAMI BEACH, FL 33139

Current Mailing Address:

924 LINCOLN RD
205
MIAMI BEACH, FL 33139

FEI Number: 59-2423867

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DEL VALLE, MARIA
SOUTH-FLORIDA ART CENTER, INC.
924 LINCOLN RD STE 205
MIAMI BEACH, FL 33139 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 P
Name KOVEL, KIM
Address 5160 NORTH BAY ROAD
City-State-Zip: MIAMI BEACH FL 33139

Title S
Name WEISS, MERLE
Address 9 ISLAND AVENUE #1107
City-State-Zip: MIAMI BEACH FL 33139

Title T
Name RODRIGUEZ, ERIC
Address 401 OCEAN DRIVE #824
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name DEL VALLE, MARIA
Address 720 NE 69 ST APT #23W
City-State-Zip: MIAMI FL 33138

Title VP, EDUCATION
Name GARCIA, LILIA
Address 415 CALIGULA AVE
City-State-Zip: CORAL GABLES FL 33146

Title VP, EXHIBITIONS
Name THIELE, KRISTEN
Address 1447 SW 15 ST
City-State-Zip: MIAMI FL 33145

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: MARIA DEL VALLE

EXECUTIVE DIRECTOR

01/15/2014

Electronic Signature of Signing Officer/Director Detail

Date