

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000005478

**Entity Name:** MIAMI-DADE FOUNDATION FOR EDUCATIONAL INNOVATION, INC

**FILED**  
**Jan 22, 2020**  
**Secretary of State**  
**3114077618CC**

**Current Principal Place of Business:**

1080 LABARON DRIVE  
MIAMI SPRINGS, FL 33166

**Current Mailing Address:**

1080 LABARON DRIVE  
MIAMI SPRINGS, FL 33166

**FEI Number: 45-2690728**

**Certificate of Status Desired: No**

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

BELL, MICHAEL J  
1080 LABARON DRIVE  
MIAMI SPRINGS, FL 33166 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            PRESIDENT, DIRECTOR  
Name            BELL, MICHAEL J.  
Address        1717 N BAYSHORE DRIVE, #2651  
City-State-Zip: MIAMI FL 33132

Title            SECRETARY, DIRECTOR  
Name            BALLENT, CAROL E.  
Address        11245 SW 91 AVENUE  
City-State-Zip: MIAMI FL 33176

Title            DIRECTOR  
Name            ACEVEDO-ISENBERG, JEANNETTE  
Address        9411 SW 150 STREET  
City-State-Zip: MIAMI FL 33176

Title            DIRECTOR  
Name            JONES, FREDDIE  
Address        3061 LIME COURT  
City-State-Zip: COCONUT GROVE FL 33133

*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: MICHAEL BELL**

**PRESIDENT, DIRECTOR**

**01/22/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date