

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000011041

**Entity Name:** MIAMI-DADE COUNTY FAIR SCHOLARSHIP FOUNDATION, INC.

**FILED**  
**Apr 26, 2024**  
**Secretary of State**  
**8565055766CC**

**Current Principal Place of Business:**

10901 CORAL WAY  
MIAMI, FL 33165

**Current Mailing Address:**

10901 CORAL WAY  
MIAMI, FL 33165

**FEI Number:** 47-2468576

**Certificate of Status Desired:** No

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

CORA, EDUARDO F  
10901 CORAL WAY  
MIAMI, FL 33165 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           DIRECTOR  
Name           CUEVAS, ROGER  
Address        10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title           PRESIDENT  
Name           CORA, EDUARDO F  
Address        10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title           DIRECTOR  
Name           MORRIS, MARGUERITE  
Address        10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title           SECRETARY  
Name           BELLIDO, NELSON  
Address        10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title           DIRECTOR  
Name           RODRIGUEZ, MANUEL  
Address        10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title           DIRECTOR  
Name           ALEXANDER, IVONNE F.  
Address        10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title           DIRECTOR  
Name           CARPENTER, WILLIE L  
Address        10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title           DIRECTOR  
Name           GARCIA-TOLEDO, RAFAEL  
Address        10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

**Continues on page 2**

*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:** EDUARDO CORA

**PRESIDENT**

**04/26/2024**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title IMMEDIATE PAST CHAIRWOMAN  
Name GONZALEZ-ROBIOU, GEORGINA  
Address 10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title CHAIRMAN  
Name HEVIA, ROBERT  
Address 10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title DIRECTOR  
Name LORIA, DOUGLASS S  
Address 10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title DIRECTOR  
Name ROJAS, MARIA T  
Address 10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title DIRECTOR  
Name DOTSON DEAN, CHRISTA  
Address 10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title DIRECTOR  
Name GRIFFITH, JACK  
Address 10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title TREASURER  
Name KRINZMAN, RICHARD  
Address 10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title CHAIR ELECT  
Name MARTINEZ, ALEXIS L  
Address 10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165

Title DIRECTOR  
Name LOPEZ-CANTERA, CARLOS JR.  
Address 10901 CORAL WAY  
City-State-Zip: MIAMI FL 33165