

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

DOCUMENT# N15000009870

**Entity Name:** 4WARD MIAMI, INC.

**Current Principal Place of Business:**

421 NE 51 STREET  
MIAMI, FL 33137

**Current Mailing Address:**

421 NE 51 STREET  
MIAMI, FL 33137 US

**FEI Number:** 47-4438607

**Certificate of Status Desired:** No

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

REGISTERED CORPORATE SERVICES LLC  
421 NE 51 STREET  
MIAMI, FL 33137 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:** REGISTERED CORPORATE SERVICES LLC

10/27/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name PARDO, DAMIAN  
Address 421 NE 51 STREET  
City-State-Zip: MIAMI FL 33137

Title D  
Name ANDREWS, GEORGE  
Address 782 NE 75TH STREET  
City-State-Zip: MIAMI FL 33138

Title D  
Name DUBERLI, FRANCESCO  
Address 1111 BRICKELL BAY DRIVE  
PH3301  
City-State-Zip: MIAMI FL 33131

Title D  
Name DUNBAR, BELLA  
Address 1250 S. MIAMI AVENUE  
2411  
City-State-Zip: MIAMI FL 33131

Title D  
Name MERZ, MICHELLE  
Address 888 BISCAYNE BLVD  
City-State-Zip: MIAMI FL 33131

Title D  
Name CASANAS, JONATHAN  
Address 600 NE 25TH STREET  
#52  
City-State-Zip: MIAMI FL 33137

Title D  
Name MCKNIGHT, CORY  
Address 7128 INDIAN CREEK DRIVE  
9  
City-State-Zip: MIAMI BEACH FL 33141

Title D  
Name GONZALEZ, YAS  
Address 1211 NW 193 AVE  
City-State-Zip: PEMBROKE PINES FL 33029

**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:** DAMIAN PARDO

DIRECTOR, CHAIR

10/27/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name BARBASTRO, ASIEL  
Address 1211 NW 193 AVE  
City-State-Zip: PEMBROKE PINES FL 33029

Title D  
Name RAMOS, ALYSSA  
Address WILL FILL  
City-State-Zip: MIAMI FL

Title D  
Name ROMAN, MICHAEL  
Address 334 NE 86 STREET  
City-State-Zip: MIAMI FL 33138

Title D  
Name MENA, NICHOLE  
Address 18905 SW 128 CT  
City-State-Zip: MIAMI FL 33177

Title D  
Name FARIÑAS-RAMOS, YENEY  
Address 6820 N. WATERWAY DR.  
City-State-Zip: MIAMI FL 33155

Title D  
Name ORDONEZ, GRECIA  
Address 669 PUBLIC STREET  
City-State-Zip: PROVIDENCE RI 02907

Title D  
Name AVILA, WILL  
Address 18905 SW 128 CT  
City-State-Zip: MIAMI FL 33177