#### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25080

Entity Name: MIAMI-DADE COUNTY SCHOOL BOARD FOUNDATION, INC.

FILED
Mar 07, 2023
Secretary of State
2150107987CC

#### **Current Principal Place of Business:**

1450 N.E. 2ND AVENUE

SUITE 912

MIAMI, FL 33132-8308

# **Current Mailing Address:**

1450 N.E. 2ND AVENUE

**SUITE 615** 

MIAMI, FL 33132-8308

FEI Number: 65-0093213 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DOTRES, JOSE L DR. 1450 NE 2 AVENUE SUITE 912

MIAMI, FL 33132 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: JOSE L. DOTRES 03/07/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title C Title D

Name ROJAS, MARIA TERESA Name BAEZ-GELLER, LUCIA

Address 1450 N.E. 2ND AVENUE Address 1450 NE 2ND AVE

SUITE 700

City-State-Zip: MIAMI FL 33132-8308 City-State-Zip: MIAMI FL 33132

Title PS Title VTAS

Name DOTRES, JOSE L. Name STEIGER, RON Y.

Address 1450 N.E. 2 AVENUE, SUITE 912 Address 20030 NE 20 COURT

City-State-Zip: MIAMI FL 33132 City-State-Zip: MIAMI FL 33179

Title D Title VC

Name BENDROSS-MINDINGALL, DOROTHY Name ESPINO, DANIEL

Address 3310 N.W. 80 TERRACE Address 1450 NE 2ND AVE 700

City-State-Zip: MIAMI FL 33147 City-State-Zip: MIAMI FL 33132

Title D Title [

Name BLANCO, MARY Name SANTOS, LUISA Address 1450 N.E. 2ND AVENUE

SUITE 700 AVENUE Address 1450 NE 2ND AVE

700

City-State-Zip: MIAMI FL 33132-8308 City-State-Zip: MIAMI FL 33132

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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: MARGARITA BETANCOURT MS. 03/07/2023

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title D Title D

Name GALLON, STEVE III Name COLUCCI, MONICA

Address 771 N.W. 167 TERRACE Address 1450 N.E. 2ND AVENUE

SUITE 700

City-State-Zip: MIAMI GARDENS FL 33169

City-State-Zip: MIAMI FL 33132-8308

Title AS Title

Name BETANCOURT, MARGARITA

Name ALONSO, ROBERTO J.

Address 1450 N.E. 2ND AVENUE

SUITE 615

Address 1450 N.E. 2ND AVENUE

D

City-State-Zip: MIAMI FL 33132

City-State-Zip: MIAMI FL 33132-8308