2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N98000001406

Entity Name: TOUCHING MIAMI WITH LOVE MINISTRIES, INC.

FILED
Jul 30, 2025
Secretary of State
6771320160CC

Current Principal Place of Business:

711 NW 6TH AVENUE MIAMI, FL 33136

Current Mailing Address:

PO BOX 013279 MIAMI, FL 33101

FEI Number: 65-0831654 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARRIS, ULTRINA 711 NW 6TH AVENUE MIAMI, FL 33136 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: ULTRINA HARRIS 07/30/2025

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR Title PRESIDENT

Name SCOTT, CHE Name ESTIME, JENNIFER

Address 79 SW 12TH ST PH 307 Address 6518 SW 60TH AVE

City-State-Zip: MIAMI FL 33130 City-State-Zip: SOUTH MIAMI FL 33143-3403

Title DIRECTOR Title DIRECTOR

Name TURNER, NIKKI Name LANZA, MAYELA

Address 1300 BRICKELL BAY DR APT 2508 Address 2560 SW 27TH AVENUE

City-State-Zip: MIAMI FL 33131-3395 City-State-Zip: MIAMI FL 33133

Title TREASURER Title DIRECTOR

Name CASTAING, NADIA Name MCWHIRTER, JOHN

Address 500 BRICKELL AVE APT 2403 Address 7495 SW 114TH STREET

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33156

TitleDIRECTORTitleDIRECTORNameSMITH, LADYNamePEREZ, JAVIER

Address 3020 SW 2ND AVENUE Address 160 CLAIREMONT AVE., SUITE 500

City-State-Zip: MIAMI FL 33129 City-State-Zip: DECATUR GA 30030

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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: JENNIFER ESTIME

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

07/30/2025

Officer/Director Detail Continued:

Title DIRECTOR

Name ARECES, CARLOS

Address 9950 SW 87TH AVENUE

City-State-Zip: MIAMI FL 33176

Title DIRECTOR

Name LOMAX, CHRIS

Address 1215 PIZARRO STREET

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR

Name GATES, NAKEETA

Address 915 NW 1ST AVENUE

APT LP 208

City-State-Zip: MIAMI FL 33136

Title DIRECTOR
Name HANSEN, BILL

Address 2167 SOUTH BAYSHORE DRIVE

City-State-Zip: COCONUT GROVE FL 33133

Title CEO

Name HARRIS, ULTRINA ALEXIS

Address PO BOX 01-3279 City-State-Zip: MIAMI FL 33101

Title DIRECTOR

Name SNYDER, TAMMY

Address P.O BOX 2556

City-State-Zip: LAKELAND FL 33806

Title DIRECTOR

Name CHARYN, MICAH

Address 2121 PONCE DE LEON BLVD

City-State-Zip: CORAL GABLES FL 33134