

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000047228

Entity Name: MIAMI EXCHANGE, INC.

Current Principal Place of Business:

190 NE 3RD STREET
MIAMI, FL 33132

FILED
Jan 16, 2014
Secretary of State
CC4000283818

Current Mailing Address:

190 NE 3RD STREET
MIAMI, FL 33132

FEI Number: 37-1694185

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SWITCHBOARD OF MIAMI, INC.
190 NE 3RD STREET
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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title CHAIRMAN
Name URQUIOLA, JOAQUIN
Address 2121 PONCE DE LEON BLVD.
SUITE 1100
City-State-Zip: CORAL GABLES FL 33134

Title VC
Name NORIEGA, ARTHUR
Address 40 NW 3RD STREET
SUITE 1103
City-State-Zip: MIAMI FL 33128

Title SECRETARY/TREASURER
Name FERNANDEZ, ANDY
Address 7480 SW 40TH STREET
SUITE 560
City-State-Zip: MIAMI FL 33155

Title DIRECTOR
Name SIBLEY, PETE
Address 190 NE 3RD STREET
City-State-Zip: MIAMI FL 33132

Title DIRECTOR
Name O'NEIL, LORRAINE
Address 608 SE 6TH STREET
SUITE 1
City-State-Zip: FORT LAUDERDALE FL 33301

Title DIRECTOR
Name ROSENBERG, MICHAEL DR.
Address 3550 ROYAL PALM AVENUE
City-State-Zip: COCONUT GROVE FL 33133

Title CEO
Name PENROD, CATHERINE F
Address 190 NE 3RD STREET
SUITE B
City-State-Zip: MIAMI FL 33132

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CATHERINE F. PENROD

CEO

01/16/2014

Electronic Signature of Signing Officer/Director Detail

Date