

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91275 040 ****61.25

DOCUMENT # 710630

1. Entity Name

MIAMI BEACH BAR ASSOCIATION

Principal Place of Business

Mailing Address

% BRUCE REICH
 1111 LINCOLN ROAD, #802
 MIAMI BEACH FL 33139
 US

% BRUCE REICH
 1111 LINCOLN ROAD, #802
 MIAMI BEACH FL 33139
 US

2. Principal Place of Business
c/o Pedro Cofino
 407 Lincoln Rd #2B

3. Mailing Address
c/o Pedro Cofino
 407 Lincoln Rd #2B

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
 Miami Beach FL

City & State
 Miami BEACH FL

4. FEI Number
 59-2291789

Applied For
 Not Applicable

Zip
 33139-3018

Country
 USA

Zip
 33139-3018

Country
 USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

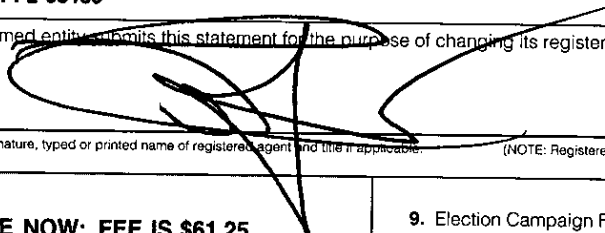
6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REICH, BRUCE
 1111 LINCOLN ROAD
 #802
 MIAMI BEACH FL 33139

Name: Pedro A. Cofino
 Street Address (P.O. Box Number is Not Acceptable):
407 Lincoln Rd #2B
 City: MIAMI BEACH FL Zip Code: 33139

8. 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:  DATE: 2-19-02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REICH, BRUCE S. 1111 LINCOLN RD #802 MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VPD HERTZ, STEPHEN G 767 ARTHUR GODFREY ROAD MIAMI BCH. FL 33140	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VD COFINO, PEDRO A ESQ. 407 LINCOLN RD #2B MIAMI BCH FL 33139-3018	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JONASZ, JONATHAN 777 ARTHUR GODFREY ROAD MIAMI BEACH FL 33140	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ZEIGER, MITCHELL S ESQ. 16625 SW 74TH CT MIAMI FL 33157-3873	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SPILL, JOY B 9100 SOUTH DADELAND BLVD #504 MIAMI FL 33156-7815	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Pedro Cofino 407 Lincoln Road #2B Miami Beach FL 33139	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VPD Stephen Hertz 767 Arthur Godfrey Road M. B. FL 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec D Michael Gongora	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Jonasz, Jonathan 777 Arthur Godfrey Road Miami Beach FL 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2 nd VP D Zeiger Mitchell 16625 SW 74th Ct Miami FL 33157-3873	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3 rd VP Spill Joy B 9100 So Dadeland Blvd #504 MIAMI FL 33156-7815	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED DATE: 2-19-02 DAYTIME PHONE: 305

CR2E037 (9/01)