

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729846

FILED
Jan 16, 2004
Secretary of State**Entity Name:** DIABETES RESEARCH INSTITUTE FOUNDATION, INC.**Current Principal Place of Business:**3440 HOLLYWOOD BLVD
STE 100
HOLLYWOOD, FL 33021 US**New Principal Place of Business:****Current Mailing Address:**3440 HOLLYWOOD BLVD.
#100
HOLLYWOOD, FL 33021 US**New Mailing Address:****FEI Number:** 59-1361955 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KATZ, THOMAS O. ESQ
RUDEN, MCCLOSKEY, SMITH
200 EAST BROWARD BLVD 15TH FLOOR
FT LAUDERDALE, FL 33301 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:**Title:** S () Delete
Name: SINGER, SHELDON
Address: 3714 RED MAPLE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445**Title:** D () Delete
Name: SONBERG, STEVEN
Address: 701 BRICKELL AV STE 3000
City-St-Zip: MIAMI, FL**Title:** D () Delete
Name: BEBER, BERNARD DR &, MRS
Address: 7345 SW 133 TERRACE
City-St-Zip: MIAMI, FL**Title:** EVP () Delete
Name: PEARLMAN, ROBERT A
Address: 6737 PORTSIDE
City-St-Zip: BOCA RATON, FL**Title:** D () Delete
Name: CALLES, JUAN MR & MR, S
Address: 1120 ALFONSO AVENUE
City-St-Zip: CORAL GABLES, FL**Title:** D () Delete
Name: SHELTON, JAMES C
Address: 310 E ROYAL PALM ROAD
City-St-Zip: BOCA RATON, FL**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT A. PEARLMAN

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01/16/2004

Electronic Signature of Signing Officer or Director

Date