FILED May 05, 2003 8:00 am § Secretary of State

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 744128 1. Entity Name MIAMI PALMETTO BAND PATRONS' ASSOCIATION, INC.						05-05-2003 90342 028 ****61.25				
Principal Place of Business 7460 S.W. 118 STREET MIAMI FL 33156		Mailing Address 13615 S DIXIE HWY # 114-442 MIAMI FL 33176			WED	11036222				
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & Stat	е	City & State				4. FEI Number 59-1846280 Applied For Not Applied For				
Zip	Zip Country Zip		Zip Country			5. Certificate of Status Desired		\$8.75 Add	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent						7. Name and Addr	ess of New Regist	ered Agent		
الرابعين والمتهد	ر در در از از در میسینیسیسیسی میشد. در میشود در میشود این در میشود در میشود در میشود در میشود در میشود در میشود					Name Perla Moreno				
MYERS, JUDY				Street	Street Address (P.O. Box Number is Not Acceptable)					
15605 SW 62 CT MIAMI FL 33157				<u> </u>	137	0 SW 140 7	<u>'errace</u>			
MUAMI FL	. 33131									
				City	Mia	m i		FL Zip Cod	58	
	named entity submits this statement	for the purpose of	changing its r	egistered office			he State of Florida.			
the obligat	ions of registered agent.			1 0	15					
010.1171.05	Perla MoreNo.2,	Creasurer	11/	lake	#1/1/	wend	04/	29/03		
SIGNATURE .	Signature, typed or printed name of registered age		 _	Registered Agent sign				DATE		
FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State				
10,	OFFICERS AND [11.		ADDITIONS/CHANGE	S TO OFFICERS AN	ND DIRECTORS IN	10	
TITLE	PD	4	Delete	TITLE	PD			Change	Addition	
NAME	SHULMAN, MICHAEL			NAME CIRCET APPRESS	ſ	en, Laura	•			
STREET ADDRESS CITY-ST-ZIP	13975 SW 73 COURT MIAMI FL 33158			STREET ADDRESS CITY-ST-ZIP	1,00	65 SW 62 A				
TITLE	DV		Delete	TITLE	DV	ecrest, FI	1. 3315b	Change	Addition	
NAME	GIROUX, MIKE	-	1 Duloto	NAME	1 - '	k, Jan				
STREET ADDRESS	13725 SW 83 CT			STREET ADDRESS		0 SW 112 S	Street			
CITY-ST-ZIP	MIAMI FL 33158			CITY-ST-ZIP		ecrest, FI				
TITLE	STONE, AUDREY		Delete	TITLE NAME				Change	☐ Addition	
NAME STREET ADDRESS	12301 SW 71 CT			STREET ADDRESS	1					
CITY-ST-ZIP	MIAMI FL 33156			CITY-ST-ZIP						
TITLE	V	<u> </u>	Delete	TITLE	V			☐ Change	Addition	
NAME	SOVEN, SONDRA			NAME		es, Carol				
STREET ADDRESS	13720 SW 73 AVE			STREET ADDRESS	11341	03 SW 58 A				
CITY-ST-ZIP	MIAMI FL 33158			CITY-ST-ZIP		ecrest, FI	_33156		Addition	
TITLE NAME	MULLINS, SUZANNE	Ľ	Delete	TITLE NAME	S	nran, Jane	110	☐ Change	Addition	
STREET ADDRESS	I make days and amorem			STREET ADDRESS		0 SW 185 Street				
CITY-ST-ZIP	MIAMI FL 33157			CITY-ST-ZIP		ni, FL 331				
TITLE	T	م	Delete	TITLE	T			☐ Change	Addition	
NAME	MYERS, JUDY			NAME OTREET ARRESTOR		irez, Perl			ſ	
STREET ADDRESS CITY-ST-ZIP	15605 SW 82 CT MIAMI FL 33157			STREET ADDRESS CITY-ST-ZIP	1 .	SW 140 T				
	certify that the information supplied w	th this filing door =	ot qualify for t		Miar	,		or cortifu that the	formation	
indicated of the cor	on this report or supplemental report on this report or supplemental report poration or the receiver or trustee em or on an attachment with an address	is true and accura	te and that my	/ signature shall s required by Ch	have the s	ame legal effect as if	made under oath; t	hat I am an officer	or director	

SIGNATURE: Perhamber of printer have of signing office of printer of the printer