2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770747

Entity Name: COMMUNITY AIDS RESOURCE, INC.

FILED Apr 07, 2004 Secretary of State

Current Principal Place of Business:		New Principal Place of Bu	New Principal Place of Business:	
	•	New Finicipal Flace Of Di	101110 3 31	
3510 BISC SUITE 300	AYNE BLVD.)			
MIAMI, FL	33137 US			
Current M	lailing Address:	New Mailing Address:	New Mailing Address:	
1320 SO. DIXIE HWY.		3510 BISCAYNE BLVD	3510 BISCAYNE BLVD	
STE. 485	ABLES, FL 33146 US	SUITE 300 MIAMI, FL 33137 US		
FEI Number	: 59-2564198 FEI Number Applied For()	FEI Number Not Applicable ()	ertificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of Nev	w Registered Agent:	
	MUEL, ESQ. AYSHORE DR. #811 33133 US			
	named entity submits this statement for the e of Florida.	purpose of changing its registered office	ce or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered Ag	gent	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO	O OFFICERS AND DIRECTOR	
Title:	TD () Delete	Title: () Cl	nange()Addition	
Name:	BROWN, TERENCE L	Name:		
Address: City-St-Zip:	780 NE 69TH STREET, #1702 MIAMI, FL 33138	Address: City-St-Zip:		
City-St-Zip.	IVIIAIVII, I E 33136	City-St-Zip.		
Title:	SD () Delete	* *	nange ()Addition	
Name:	COHEN, LYNN	Name:		
Address:	7955 SW 100TH ST	Address:		
City-St-Zip:	MIAMI, FL 33156	City-St-Zip:		
Title:	PD () Delete	Title: () Cl	nange () Addition	
Name:	PEDROSO, GLENDA	Name:		
Address:	700 BRICKELL AVE. 4TH FL.	Address:		
City-St-Zip:	MIAMI, FL 33131	City-St-Zip:		
Title:	VD () Delete	Title: () Cl	nange () Addition	
Name:	GARY, LORRAINE	Name:	lange () / ladition	
Address:	5322 NW 22ND AVENUE	Address:		
City-St-Zip:	MIAMI, FL 33121	City-St-Zip:		
Title:	MD () Delete	Title: () Cl	nange () Addition	
Name:	SICLARI, RICHARD	Name:		
Address:	1320 SOUTH DIXIE HWY., STE. 485	Address:		
City-St-Zip:	CORAL GABLES, FL 33146 US	City-St-Zip:		
Title:	VD () Delete	Title: () Cl	nange () Addition	
Name:	CORBETT, RUSSELL	Name:	• ()	
Address:	1780 NE 137TH TERR	Address:		
City-St-Zip:	NORTH MIAMI, FL 33181	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: RICK SICLARI MD 04/07/2004