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

DOCUMENT # N0000005144

1. Entity Name

MIAMI BEACH EDUCATION FOUNDATION, INC.



FILED Feb 21, 2003 8:00 am Secretary of State

01-13-2003 90491 042 ****61.25

Principal Place C/O LAW OFF 1111 LINCOLN I MIAMI BEACH F	ice of S. David Sheffman rd #802	Mailing Address PO BOX 403226 MIAMU BEACH FL 33140			P LEGALIZER BUI GOI			K 110 KW	·
2. Principal Place of Business		3. Mailing Address				 		H 410 1 1484	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State	9	City & State			4. FEI Number 31	4. FEI Number 31-1735967 Applied For Not Applicable			
Zip -		Zip C		ntry	5. Certificate of St	5. Certificate of Status Desired S8.75 Additional Fee Required			<u>a</u> r t
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
				Name					
	N, S. DAVID COLN RD., #802			Street Address (P.O. Box Number is Not Acceptable)					
	ACH FL 33139								
<u> </u>	•		!	City FL Zip Code					
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Storators board or opposite agent and life if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
·	Signature, typed or printed name of registered agent is	rid file if applicable. (NO)	C. Hogistere						
FILE NOW: FEE IS \$61.25 9. Election Campa Trust Fund Con									
10.	OFFICERS AND DIRECTORS 11.				ADDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN		₽
TITLE	D COLLER, LESUE	☐ Delete	TITLI				Change	☐ Addition	CR2E037 (10/02)
NAME STREET ADORESS	5301 LAGROCE DR.			ET ADDRESS				1	37 (
CITY-ST-ZIP	MIAMI BEACH FL 33139		CITY	-ST-ZIP					ZEG
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NAME	KOLKER, DANNY		NAM - CTD	E ET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	3060 ALTON RD. MIAMI BEACH FL 33140			-ST-ZIP					
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NAME	Shelly/Groff	سعمى	NAM		→				
STREET ADDRESS CITY-ST-ZIP	PO BOX 403220			ET ADORESS					
	Miami Beach,	<u> </u>	מוז				☐ Change	Addition	
TITLE NAME	Kate Ramos		NAM		\rightarrow			}	
STREET ADDRESS	PO BOX 403226	~ > (ET ADDRESS				1	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(!). 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 place like empowered.									
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAND OFFICER OR OFFICER OR OFFICER OF OFFICER OF OFFICER OF OFFICER OFFIC									



Miami Beach Education Foundation, Inc. P.O. Box 403226 Miami Beach, Florida 33140 (305) 532-6844

NOVO 000 00 144 58 00 95 97

February 18, 2003

FLORIDA DEPARTMENT OF STATE Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Miami Beach Education Foundation, Inc. Reference Number: N00000005144

Dear Sir/Madam:

In response to your letter dated January 21, 2003, enclosed please find the 2003 Not-For-Profit Uniform Business Report of the above corporation, which has been modified in accordance with your letter. It is our understanding that the UBR is now acceptable for filing. If, however, this is not the case, please let me know.

Thank you for your assistance.

Sincerely,

Shelly Micely Ing