2001 UNIFORM BUSINESS REPORT (UBR)

07-AUG-2001 00026 040 ****61.25
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG 24 PM 3:55

DOCUMENT # N00000006759

1. Entity Name

LASALLE HIGH SCHOOL, INC.

Principal Place of Business	Mailing Address
3601 MIAMI AVENUE MIAMI FL 33133	3601 MIAMI AVENUE MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business — Suite, Apt. #, etc. — City & State — Zip — Country

3. Mailing Address — Suite, Apt. #, etc. — City & State — Zip — Country

4. FEI Number 59-1152665 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FITZGERALD, J PATRICK
110 MERRICK WAY, SUITE 3-B
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
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.

SIGNATURE ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 12, 2001, min. will be $236.25

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 DELGADO, SHERMANE 3601 MIAMI AVE MIAMI FL 33133 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pd Roche, Patricia 3601 S. Miami Ave. Miami, FL 33133 ☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V TORRES, LUISA 3601 MIAMI AVENUE MIAMI FL 33133 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD VAUGHAN, JOHN J REV 9401 BISCAYNE BLVD MIAMI SHORES FL 33138 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KELLY, VINCENT T REV 9401 BSCAYNE BLVD MIAMI SHORES FL 33138 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HENNESSEY, WILLIAM J REV 9401 BISCAYNE BLVD MIAMI SHORES FL 33138 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition SP

CR2E037 (5/01)

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 Fin. Admin. 7/17/01 305-854-2334 x.14
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

LUISA TORRES, VP 8/22/01