

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30456

FILED  
Jun 05, 2008  
Secretary of State

Entity Name: MIAMI LIGHT PROJECT, INC.

**Current Principal Place of Business:**

3000 BISCAYNE BLVD  
STE 100  
MIAMI, FL 33137 US

**New Principal Place of Business:**

**Current Mailing Address:**

3000 BISCAYNE BLVD  
STE 100  
MIAMI, FL 33137 US

**New Mailing Address:**

FEI Number: 65-0107810      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BOONE, ELIZABETH  
3000 BISCAYNE BLVD #100  
MIAMI, FL 33137 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: DC ( ) Delete  
Name: GELLES, NANCY  
Address: 1 GROVE ISLE, #1803  
City-St-Zip: COCONUT GROVE, FL 33133

Title: DP ( ) Delete  
Name: HILL, MARLON  
Address: 13525 SW 119 AVE  
City-St-Zip: MIAMI, FL 33186

Title: DS ( ) Delete  
Name: BOONE, ELIZABETH  
Address: 1292 NE 105 STREET  
City-St-Zip: MIAMI, FL 33138

Title: DT ( ) Delete  
Name: SACO, ROBERTO  
Address: 2401 ANDERSON ROAD, #14  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DC (X) Change ( ) Addition  
Name: HILL, MARLON  
Address: 13525 SW 119 AVE  
City-St-Zip: MIAMI, FL 33186

Title: DS (X) Change ( ) Addition  
Name: GORDON, SUSAN  
Address: 9000 SW 87TH COURT #108  
City-St-Zip: MIAMI, FL 33176

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 exemption stated in Chapter 119, 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: CINDY BROWN

DS

06/05/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date