

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90060 028 ****70.00

DOCUMENT # N34842

1. Entity Name

KIWANIS CLUB OF COLOMBIA-U.S.A.-MIAMI, FLORIDA, INC.

Principal Place of Business

Mailing Address

P O BOX 43-0748
 SOUTH MIAMI FL 33243
 US

P O BOX 43-0748
 SOUTH MIAMI FL 33243
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0155866

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NAVARRO, GONZALO
8959 N W 152 LANE
MIAMI LAKES FL 33016

Name

BARROS, PIEDAD

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

1538 BIRD ROAD

City

CORAL GABLES

FL

Zip Code

33146

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

Piedad Barros

Piedad Barros (President)

4/24/02

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

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 **V** ☒ Delete
 NAME **REYES, GERARDO**
 STREET ADDRESS **13499 BISCAYNE BLVD**
 CITY-ST-ZIP **NORTH MIAMI FL 33181**

TITLE **P** ☒ Change ☐ Addition
 NAME **BARROS, PIEDAD**
 STREET ADDRESS **1538 BIRD ROAD**
 CITY-ST-ZIP **CORAL GABLES, FL 33146**

TITLE **P** ☒ Delete
 NAME **NAVARRO, GONZALO**
 STREET ADDRESS **P O BOX 430748**
 CITY-ST-ZIP **SOUTH MIAMI FL 33243**

TITLE **V** ☒ Change ☐ Addition
 NAME **MORAGA, ZAMIRA**
 STREET ADDRESS **P O BOX 430748**
 CITY-ST-ZIP **SOUTH MIAMI, FL 33243**

TITLE **S** ☒ Delete
 NAME **CANACHO, JORGE**
 STREET ADDRESS **P O BOX 430748**
 CITY-ST-ZIP **SOUTH MIAMI FL 33243**

TITLE **S** ☒ Change ☐ Addition
 NAME **COURRAU, MARIA TERESA**
 STREET ADDRESS **P O BOX 430748**
 CITY-ST-ZIP **SOUTH MIAMI, FL 33243**

TITLE **D** ☒ Delete
 NAME **VELANDIA, MERCY**
 STREET ADDRESS **P O BOX 430748**
 CITY-ST-ZIP **SOUTH MIAMI FL 33243**

TITLE **T** ☒ Change ☐ Addition
 NAME **COURRAU, GERMAN**
 STREET ADDRESS **P O BOX 430748**
 CITY-ST-ZIP **SOUTH MIAMI, FL 33243**

TITLE **D** ☒ Delete
 NAME **BARROS, PIEDAD**
 STREET ADDRESS **P O BOX 430748**
 CITY-ST-ZIP **SOUTH MIAMI FL 33243**

TITLE **V** ☒ Change ☐ Addition
 NAME **VELANDIA, WILSON**
 STREET ADDRESS **6821 N SAINT ANDREWS DR.**
 CITY-ST-ZIP **MIAMI LAKES, FL 33015**

TITLE **D** ☐ Delete
 NAME **LOZANO, ANTONOR**
 STREET ADDRESS **P O BOX 430748**
 CITY-ST-ZIP **SOUTH MIAMI FL 33243**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Piedad Barros

Piedad Barros

4/24/02

305-774-5006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)