2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48705

Entity Name: KIWANIS CLUB OF MIAMI, FLORIDA, INC.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: HOTEL VILA L0733 SW 129 PLACE 5959 SW 71 ST MIAMI, FL 33186 MIAMI, FL 33156 US **Current Mailing Address: New Mailing Address:** P.O. BOX 330823 MIAMI, FL 33233 FEI Number: 59-0320115 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MAZZARELLA, JOHN 10733 SW 128 PL MIAMI, FL 33180 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CAMERON, BILLY Name: Name: 7305 SW 92 AVE Address: Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: TETZELI, JOHN P Name: CADMAN, GEORGE E Address: 6981 S.W. 59TH STREET Address: 9233 SW 212 TERR City-St-Zip: MIAMI, FL 331431829 City-St-Zip: MIAMI, FL 33156 Title: () Delete Title: (X) Change () Addition BUKSCH, BOB BUKSCH, BOB Name: Name: 8241 SW 107TH ST. Address: Address: 8241 SW 107TH ST. City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33157 () Delete Title: Title: () Change () Addition MAZZARELLA, JOHN R JR. Name: Name: 1900 BISCAYNE BLVD Address: Address: City-St-Zip: MIAMI, FL 331374532 City-St-Zip: Title: () Delete Title: (X) Change () Addition JENNINGS, BARBARA JENNINGS, BARBARA Name: Name: 702 NW 87TH AVE. 702 NW 87TH AVE. Address: Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33172 Title: () Delete Title: (X) Change () Addition PERRY, JAMES F DACKS, VALERIE Name: Name: Address: 7300 N. KENDALL DR. #519 Address: 6916 SW 43 ST. MIAMI, FL 33156 MIAMI, FL 33173 City-St-Zip: 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: JOHN MAZZARELLA T 04/27/2004