

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Mar 27, 2001 8:00 am**  
**Secretary of State**

03-27-2001 90058 027 \*\*\*\*70.00

**DOCUMENT # 707465**

1. Entity Name

**BIG BROTHERS/BIG SISTERS OF GREATER MIAMI, INC.**

Principal Place of Business

Mailing Address

**100 ALMERIA  
SUITE 310  
CORAL GABLES FL 33134****100 ALMERIA  
SUITE 310  
CORAL GABLES FL 33134****00029075**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number

**59-6166904**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**MUNIZ, LYDIA I.  
100 ALMERIA  
SUITE 310  
CORAL GABLES FL 33134**

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**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 **VALDES-FAULI, RAUL**  
STREET ADDRESS **555 NE 34TH ST #2004**  
CITY-ST-ZIP **MIAMI FL 33137**TITLE **D** ☒ Change ☐ Addition  
NAME **VALDES-FAULI, RAUL**  
STREET ADDRESS **555 NE 34TH ST # 2004**  
CITY-ST-ZIP **MIAMI FL 33137**TITLE **D** ☐ Delete  
NAME **TOBER, JOHN E**  
STREET ADDRESS **1401 BRICKELL AVE #340**  
CITY-ST-ZIP **MIAMI FL 33131**TITLE **CHAIRMAN-ELECT** ☒ Change ☐ Addition  
NAME **TOBER, JOHN E**  
STREET ADDRESS **1401 BRICKELL AVE # 340**  
CITY-ST-ZIP **MIAMI FL 33131**TITLE **D** ☒ Delete  
NAME **GOLDIN, STEVE**  
STREET ADDRESS **9500 S DADELAND BLVD #600**  
CITY-ST-ZIP **MIAMI FL 33156**TITLE **T** ☐ Change ☒ Addition  
NAME **CARDONA, OSCAR**  
STREET ADDRESS **7041 SW 156TH COURT**  
CITY-ST-ZIP **MIAMI FL 33193**TITLE **D** ☒ Delete  
NAME **SAUNDERSON, WILLIAM M**  
STREET ADDRESS **701 BRICKELL AVE., #1500**  
CITY-ST-ZIP **MIAMI FL 33131**TITLE **S** ☐ Change ☒ Addition  
NAME **CRABTREE, BONNIE**  
STREET ADDRESS **1700 DAYTONA ROAD**  
CITY-ST-ZIP **MIAMI BEACH FL 33141**TITLE **D** ☐ Delete  
NAME **STEIN, MARK**  
STREET ADDRESS **255 ALHAMBRA CR #555**  
CITY-ST-ZIP **CORAL GABLES FL 33134**TITLE **C** ☒ Change ☐ Addition  
NAME **STEIN, MARK**  
STREET ADDRESS **255 ALHAMBRA CR # 555**  
CITY-ST-ZIP **CORAL GABLES FL 33134**TITLE **P** ☐ Delete  
NAME **PRINZING, DANIEL G**  
STREET ADDRESS **1280 S ALHAMBRA CIRCLE #1227**  
CITY-ST-ZIP **CORAL GABLES FL 33146**TITLE **D** ☒ Change ☐ Addition  
NAME **PRINZING, DANIEL G**  
STREET ADDRESS **1280 S. ALHAMBRA CIRCLE # 1227**  
CITY-ST-ZIP **CORAL GABLES FL 33146**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/01

Date

Daytime Phone #

CR2E037 (10/00)



# BIG BROTHERS BIG SISTERS OF GREATER MIAMI & Mentoring Resource Center

attachment  
# 707465  
D0029075

|                                                   |                                                                |
|---------------------------------------------------|----------------------------------------------------------------|
| TITLE<br>NAME<br>STREET<br>ADDRESS<br>CITY-ST-ZIP | D<br>Lydia I. Muniz<br>1631 Bay Drive<br>Miami Beach, FL 33141 |
|---------------------------------------------------|----------------------------------------------------------------|

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Lydia I. Muniz, MSSA

## Affiliations:

Big Brothers Big Sisters of America  
America's Promise  
United Way of Miami-Dade County  
Miami-Dade County  
Office of Juvenile Justice Delinquency Prevention  
Florida Commission on Community Services  
Big Brothers Big Sisters State Association  
Department of Education  
Greater Miami Chamber of Commerce  
Governor's Mentoring Initiative

Making a Big Difference One Child At a Time

100 Almeria Avenue, Suite 310 • Coral Gables, FL 33134-9593

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