

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000004255

FILED
Feb 14, 2002 8:00 AM
Secretary of State

Entity Name: BUSINESS IMPROVEMENT DISTRICT OF CORAL GABLES, INC.

Current Principal Place of Business:

224 MIRACLE MILE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

224 MIRACLE MILE
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0782529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESTRE, SILVIA
224 MIRACLE MILE
CORAL GABLES, FL 33134

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: P () Delete
Name: FONTE, GUS
Address: 311 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: BROWN, MARVIN
Address: 136 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

Title: V () Delete
Name: LUACES, GAYE
Address: 297 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

Title: T () Delete
Name: BOLADO, JOSE
Address: 336 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: VITUCCI, NORMA
Address: 140 JEFFERSON AVE. 14015
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Delete
Name: MESTRE, SILVIA
Address: 224 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRAUN, MARVIN
Address: 136 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

Title: V (X) Change () Addition
Name: BOLADO, JOSE
Address: 336 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

Title: T (X) Change () Addition
Name: SALINAS, MARIA-JOSE
Address: 2428 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: WEISSEL, JUDY
Address: 11251 S.W. 72 COURT
City-St-Zip: MIAMI, FL 33156

Title: D (X) Change () Addition
Name: MESTRE, SILVIA
Address: 224 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

Title: () Change () Addition
Name:
Address:
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: SILVIA MESTRE

MS.

02/14/2002

Electronic Signature of Signing Officer or Director

Date