FILED 2002 UNIFORM BUSINESS REPORT (UBR) Apr 29, 2002 8:00 am Secretary of State DOCUMENT # **757006** 04-29-2002 90067 042 ****61.25 THE GREATER MIAMI SOCIETY FOR HUMAN RESOURCE MAN AGEMENT. INC. Principal Place of Business Mailing Address 200 S. BISCAYNE BLVD. 5300 SOUTHEAST FINANCIAL CENTER MIAMI FL 3311-2339 200 S. BISCAYNE BLVD. 5300 SOUTHEAST FINANCIAL CENTER MIAMI FL 331 1-2339 Principal Place of Business P. O. Box 7762 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0231220 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ZELEK, MARK E. 200 S. RISCAYNE BLVD. 5300 S.E. FINANCIAL CENTER MIAMI FL 33131-2339 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 registe and title if applicab 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICE ND DIRECTORS IN 10 TITLE TITLE Change (9/01 Delete ☐ Addition NAME HUNNEYCUTT, MILLIE NAME W. 56 Street #IIII STREET ADDRESS 17777 OLD CUTLER RD STREET ADDRESS 33012 CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33157 TITLE TITLE Delete Change Lynn NAME MONTENEGRO, DIANA NAME argulies NW 36 Ave STREET ADDRESS 3250 MARY ST STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP Miami FL 33133 TITLE Secretary 🛮 Delete TITLE ZELEK, MARK NAME NAME Davis, Terri 27,50 SW STREET ADDRESS 200 S BISCAYNE BLVD STE 5300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 miami TITI F TITLE Delete Trecusure NAME SMITH-BALT, VICKI L NAME GIRADO, ODA 3400 LOYESIA Surte 100 STREET ADDRESS 201 S BISCAYNE BLVD, STE 2400 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33131** CITY-ST-7iP TIT: F Delete TITLE ☐ Change Addition NAME KRAUS, MICHAEL NAME STREET ADDRESS 19551 WHISPERING PINES RD STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33157 TITLE ☐ Delete TITLE Change ☐ Addition ZARET, MARIE NAME NAME STREET ADDRESS 15800 NW 48 AV STREET ADDRESS **MIAMI FL 33012** 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

out out and lanet SIGNATURE:

with an address, with all other like empowered.

changed, or on an attachmen