

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90046 032 ****61.25

DOCUMENT # N94000005475

1. Entity Name

THE CEJAS FAMILY FOUNDATION, INC.



Principal Place of Business

420 LINCOLN RD
SUITE 443
MIAMI BCH FL 33139
US

Mailing Address

P.O. BOX 191768
MIAMI BCH FL 33139
US

2. Principal Place of Business

420 Lincoln Road

Suite, Apt. #, etc.

Suite 2D

City & State

Miami Beach, Florida

Zip
33139

Country
Dade

3. Mailing Address

P. O. Box 191679

Suite, Apt. #, etc.

City & State

Miami, FL

Zip
33119-1679

Country
Dade



MOORE

CR2E037 (11/03)

4. FEI Number

65-0534149

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PLC INVESTMENTS INC.
420 LINCOLN RD
SUITE 443
MIAMI BCH FL 33139

7. Name and Address of New Registered Agent

Name

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

420 Lincoln Road

Suite 2D

City

Miami Beach,

FL

Zip Code
33139

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CEJAS, HELENE C
420 LINCOLN ROAD, SUITE 443
MIAMI BEACH FL 33139 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
MONTERO, HILDA C
420 LINCOLN ROAD, SUITE 443
MIAMI BCH FL 33139 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
CEJAS, PAUL L
420 LINCOLN ROAD, SUITE 443
MIAMI BCH FL 33139 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVPT
CEJAS, GERTIE
420 LINCOLN ROAD, SUITE 443
MIAMI FL 33139 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PELEGRINI, NINA
420 LINCOLN ROAD, SUITE 443
MIAMI BEACH FL 33139 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MARKOFSKY, TIFFANY
420 LINCOLN ROAD, SUITE 443
MIAMI BEACH FL 33139 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
420 Lincoln Road, Suite 2D
Miami Beach, FL 33139

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
420 Lincoln Road, Suite 2D
Miami Beach, FL 33139

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CITY-ST-ZIP
☒ Change ☐ Addition
420 Lincoln Road, Suite 2D
Miami Beach, FL 33139

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:

Hilda C. Montero, Secretary
Hilda C. Montero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/16/04 305-531-5220