

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90100 031 ****70.00

DOCUMENT # 702242

1. Entity Name

UNIVERSITY OF MIAMI

Principal Place of Business

Mailing Address

**OFFICE OF THE PRESIDENT
 1252 MEMORIAL DR., ASHE BLDG., RM. 230
 CORAL GABLES FL 33146
 US**

**OFFICE OF THE PRESIDENT
 1252 MEMORIAL DR., ASHE BLDG., RM. 230
 CORAL GABLES FL 33146
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0624458

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**REYES, JUAN
 JACKSON MEDICAL TOWERS
 1500 N.W. 12TH AVE., STE. 1112 EAST
 MIAMI FL 33136**

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	PD	<input checked="" type="checkbox"/> Delete
NAME	FOOTE, EDWARD T. II	
STREET ADDRESS	8565 OLD CUTLER RD.	
CITY-ST-ZIP	MIAMI FL	
TITLE	MDCE	<input checked="" type="checkbox"/> Delete
NAME	COBB, CHARLES E JR	
STREET ADDRESS	255 ARAGON AVENUE SUITE 333	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	S	<input type="checkbox"/> Delete
NAME	ROBERT L BLAKE	
STREET ADDRESS	16240 ONEIDA PL	
CITY-ST-ZIP	DAVIE FL 33331	
TITLE	C	<input checked="" type="checkbox"/> Delete
NAME	MILLER, LEONARD	
STREET ADDRESS	700 N.W. 107 AVENUE	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WEAVER, DAVID R	
STREET ADDRESS	13643 DEERING BAY DR PH 165	
CITY-ST-ZIP	MIAMI FL 33158	
TITLE	VCCD	<input checked="" type="checkbox"/> Delete
NAME	RICE, CHARLES E	
STREET ADDRESS	50 NORTH LAURA STREET	
CITY-ST-ZIP	JACKSONVILLE FL 32202-3638	

TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Shalala, Donna E	
STREET ADDRESS	8565 Old Cutler Road	
CITY-ST-ZIP	Miami, FL	
TITLE	C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Frost, Phillip	
STREET ADDRESS	4400 Biscayne Blvd, 15th Floor	
CITY-ST-ZIP	Miami, FL 33137	
TITLE	VC/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Colson, Dean C.	
STREET ADDRESS	255 Aragon Avenue, 2nd Floor	
CITY-ST-ZIP	Coral Gables, FL 33134	
TITLE	VC/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Weeks, Marta S.	
STREET ADDRESS	7350 Southwest 162nd Street	
CITY-ST-ZIP	Miami, FL 33157	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	See Attached	
STREET ADDRESS	Complete List of Board Members	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

Robert L. Blake

REQUIRED

Robert L. Blake

4/30/02

305.284.2700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

ATTACH # 1702242 / 056071

University of Miami Board of Trustees

Post Office Box 248042
Coral Gables, Florida 33124-2420

Phillip Frost
Chairman

* * *

Dean C. Colson
Vice Chair

Marta S. Weeks
Vice Chair

* * * * *

Mr. Leonard L. Abess, Jr.
Chairman and Chief Executive Officer
City National Bank of Florida
25 West Flagler Street, Sixth Floor
Post Office Box 025620
Miami, Florida 33102
Telephone: 305-577-7352
Fax: 305-577-7495

Mr. Jose P. Bared
Chairman
United Petroleum
7000 Northwest 52nd Street, 2nd Floor
Miami, Florida 33166
Telephone: 305-592-5101 Ext. 2349
Fax: 305-592-2582

Mr. Michael I. Abrams
Katz, Kutter, Haigler, Alderman,
Bryant and Yon
2999 Northeast 191 Street, Suite 409
Aventura, Florida 33180
Telephone: 305-932-0996
Fax: 305-932-0972

Mr. Fred Berens
Senior Vice President
Prudential Securities
3200 First Union Financial Center
200 South Biscayne Boulevard
Miami, Florida 33131-2364
Telephone: 305-372-7033
Fax: 305-577-0207

Mr. Stanley H. Arkin
President
Arkin Consulting, Inc.
5500 Collins Avenue, Apartment 603
Miami Beach, Florida 33140
Telephone: 305-866-0185
Telephone: 305-992-6757 (cell.)
Fax: 305-861-0428

Mr. Joaquin F. Blaya
Chairman of the Board
Radio Unica
Suite 101
8400 Northwest 52 Street
Miami, Florida 33166
Telephone: 305-463-5050
Fax: 305-463-5052

Mr. Jose R. Arriola
Chairman
Inktel Direct
13975 Northwest 58 Court
Miami Lakes, Florida 33014
Telephone: 305-523-1167
Fax: 305-827-0341

Mr. Philip Blumberg
President and Chief Executive Officer
American Ventures Corporation
255 Alhambra Circle, Suite 1100
Coral Gables, Florida 33134-7400
Telephone: 305-569-9500
Fax: 305-569-0800