

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703647

Entity Name: UNITED WAY OF MIAMI-DADE, INC.

FILED
Apr 12, 2004
Secretary of State

Current Principal Place of Business:

3250 SW 3RD AVE
THE ANSIN BLDG.
MIAMI, FL 33129

New Principal Place of Business:

Current Mailing Address:

3250 SW 3RD AVE
THE ANSIN BLDG.
MIAMI, FL 33129

New Mailing Address:

FEI Number: 59-0830840 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOGUL, HARVE A
3250 SW 3RD AVE
MIAMI, FL 33129 US

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: MOGUL, HARVE A
Address: 1 SE E. 3RD AVENUE #2000
City-St-Zip: MIAMI, FL

Title: CBD () Delete
Name: HENRIQUES, ADOLFO
Address: 2800 PONCE DE LEON BLVD, 15TH FLOOR
City-St-Zip: MIAMI, FL 33134

Title: SD () Delete
Name: BERMONT, PETER L
Address: 1 SE 3RD AVE STE-2950
City-St-Zip: MIAMI, FL 331411740

Title: TD () Delete
Name: ARGIZ, TONY
Address: 1001 BRICKELL BAY DRIVE, 9TH FLOOR
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: POPE, ANN
Address: 1 SE 3RD AVE STE-2950
City-St-Zip: MIAMI, FL 331411740

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: HARVE A MOGUL

CEO

04/12/2004

Electronic Signature of Signing Officer or Director

_____ Date