

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90077 015 ****61.25

DOCUMENT # 704429	
1. Entity Name OPTIMIST CLUB OF NORTH SHORE MIAMI BEACH	

Principal Place of Business 416 WEST SAN MARINO DRIVE MIAMI BEACH, FL 33139 US	Mailing Address 416 WEST SAN MARINO DRIVE MIAMI BEACH, FL 33139 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01192005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-0153223		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
PARDO, JOSEPH 416 WEST SAN MARINO DRIVE MIAMI BEACH, FL 33139		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. 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

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOETT BREIT 9661 W. BAY PARKWAY DRIVE MIAMI, FL 33154 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MAX LAZAGA ☒ Change ☐ Addition 243 POINCIANA IS. DRIVE SUNNY ISLE BEACH FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAUFMAN, BUDDY 1001 SOUTH SHORE DRIVE MIAMI BEACH, FL 33141 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHN DEBLASIO 2000 TOWER SIDE TERR. APT 1611 MIAMI, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JOSEPH PARDO VP ☒ Change ☐ Addition 416 W. SAN MARINO DRIVE MIAMI BEACH FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD PARDO, JOSEPH 416 W. SAN MARINO DR. MIAMI BEACH, FL 33239 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAHAM, MURRAY 1000 QUASIDE TERR #1604 MIAMI, FL 33138 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition MIAMI BEACH FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WEINBERG, LARRY 850 W. 43 COURT MIAMI, FL 33140 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition MIAMI BEACH FL 33140

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 it made under oath; that I am an officer or director of the corporation or the person authorized to execute the 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 information.

SIGNATURE: Joseph Pardo **JOSEPH PARDO** 3/10/05 (305) 673-1515
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #