2005 NOT-FOR-PROFIT CORPORATION

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

05 SEP 23 PH 3: 47 1375

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416 WEST SAN MARINO DRIVE 410		ailing Address 16 WEST SAN MARINO DRIVE IIAMI BEACH, FL 33139 US			IALL	ا و ساماد در این اور نیمتر	LEGINON		
2-Brincipal Place of Business WEINBERG 3-Mailing Address V L				ER C					
Suite Apt. # etc. Suit		Suite, Apt. #, etc.	ite, Apt. #, etc. 1 43G		0000000	hg-NP (CR2E037 (10/03)		
City & State		Nation P	MANI BEACIT		4. FEI Number 59-015322	 23		pplied For	
Zip	Country 2C	3314n	Country	,	5. Certificate of Si	tatus Desired	S8.75 Ad	ditional	
	6. Name and Address of Current Rec	pistered Agent	.		7. Name and Add	Iress of New Reg	····	5 0	
PARDO, JOSEPH				Name DRY DENBERG					
416 WEST SAN MARINO DRIVE				Street Address (P.O. Box Number is Not Acceptable)					
MIAMI BEA	ACH, FL 33139		050 (D) 1/3 (+)						
			City	M 10	M/ 12	FAT H	FL 252	140	
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 bits of applicable. (NOTE: Registered Agent signature reflured when revistators) DELITER OF THE OFFICE REGISTER OFFICE REGISTER OF THE OFFICE REGISTER OFFICE REG									
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	Amended AR is \$61.25	9. Election Camp Trust Fund Cor			\$5.00 May Be Added to Fees		e check payable to Department of S		
10.	OFFICERS AND DIREC	Trust Fund Co	ntribution.	LJ ,	Added to Fees	Florida		tate	
10.	OFFICERS AND DIRECT	Trust Fund Co.	11.	IJ,	Added to Fees	Florida	Department of S	tate	
10.	OFFICERS AND DIREC	Trust Fund Co	ntribution.	LJ ,	Added to Fees	Florida	AND DIRECTORS IN	tate	
10. TITLE NAME	OFFICERS AND DIRECT PD LAZAGA, MAX	Trust Fund Col	11. TITLE NAME	LJ ,	Added to Fees	Florida	AND DIRECTORS IN	tate	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRECT PD LAZAGA, MAX 243 POINCHINA IS DRIVE SUNNY ISLE BEACH, FL 32160	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	LJ ,	Added to Fees	Florida	AND DIRECTORS IN	tate	
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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 frustee 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: