

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90017 047 ****61.25

DOCUMENT # 704429

1. Entity Name
OPTIMIST CLUB OF NORTH SHORE MIAMI BEACH



Principal Place of Business
**C/O LARRY WEINBERG
850 W. 43 CT.
MIAMI BEACH, FL 33140 US**

Mailing Address
**C/O LARRY WEINBERG
850 W. 43 CT.
MIAMI BEACH, FL 33140 US**

30024110



01092006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

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

**WEINBERG, LARRY
850 W. 43 CT
MIAMI BEACH, FL 33140**

**DO NOT WRITE
IN THIS SPACE**

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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LAZAGA, MAX
STREET ADDRESS 243 POINCHINA IS DRIVE
CITY-ST-ZIP SUNNY ISLE BEACH, FL 32160

TITLE D
NAME PLATT, CARL
STREET ADDRESS 9180 W. BAY HARBOR DR. #5C
CITY-ST-ZIP BAY HARBOR, FL 33154

TITLE ~~PD~~
NAME ~~MARMER, HAROLD~~
STREET ADDRESS ~~7608 SW 112 ST~~
CITY-ST-ZIP ~~MIAMI, FL 33156~~

TITLE ~~D~~
NAME ~~GRAHAM, MURRAY~~
STREET ADDRESS ~~1090 QUAY SIDE TERR #1504~~
CITY-ST-ZIP ~~MIAMI, FL 33138~~

TITLE STD
NAME WEINBERG, LARRY
STREET ADDRESS 850 W. 43 CT.
CITY-ST-ZIP MIAMI BEACH, FL 33140

TITLE ~~STD~~
NAME ~~WEINBERG, LARRY~~
STREET ADDRESS ~~850 W. 43 COURT~~
CITY-ST-ZIP ~~MIAMI, FL 33142~~

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Larry Weinberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LARRY WEINBERG

7/21/06 3055267183
Date Daytime Phone #