

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 16, 2004
Secretary of State**

DOCUMENT# 718075

Entity Name: THE VIZCAYANS

Current Principal Place of Business:

3251 S MIAMI AVENUE
MIAMI, FL 33129

New Principal Place of Business:

Current Mailing Address:

3251 S MIAMI AVENUE
MIAMI, FL 33129

New Mailing Address:

FEI Number: 59-0908711 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARWELL, RICHARD
3251 S. MIAMI AVE.
MIAMI, FL 33129

Name and Address of New Registered Agent:

DIAZ, ANNETTE M EXEC DI
3251 S. MIAMI AVE.
MIAMI, FL 33129

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: ANNETTE MAYER DIAZ 03/16/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAX, BLUMBERG
Address: 5770 MIAMI LAKES DR
City-St-Zip: MIAMI LAKES, FL 33014

Title: S () Delete
Name: SEPLER, DIANE
Address: 1581 BRICKELL AVE T-204
City-St-Zip: MIAMI, FL 33129

Title: D () Delete
Name: BRODY, BETTY
Address: 6146 PARADISE POINT DR
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: GREGORTOU, PERRY
Address: 2025 BRICKELL #1004
City-St-Zip: MIAMI, FL 33129

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MURPHY, JAMES W
Address: 2843 S. BAYSHORE DRIVE #3E
City-St-Zip: MIAMI, FL 33133

Title: VPD (X) Change () Addition
Name: QUINTERO, NORMA
Address: 1221 N.W. 165 STREET
City-St-Zip: MIAMI, FL 33169

Title: VPD (X) Change () Addition
Name: KENNY, DAVID H
Address: 5100 NORTH BAY ROAD
City-St-Zip: MIAMI BEACH, FL 33140

Title: TD (X) Change () Addition
Name: WEISBERG, ALAN
Address: 1401 BRICKELL AVENUE SUITE 800
City-St-Zip: MIAMI, FL 33131

Title: VPD () Change (X) Addition
Name: PEEBLES, KATRINA
Address: 550 BILTMORE WAY SUITE 970
City-St-Zip: CORAL GABLES, FL 33134

Title: SD () Change (X) Addition
Name: JONES, CATHY L
Address: 3 GROVE ISLE DRIVE #502
City-St-Zip: MIAMI, FL 33133

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: JAMES W. MURPHY PRES 03/16/2004
Electronic Signature of Signing Officer or Director Date