2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 740322

1. Entity Name

COMMUNITY ASSOCIATIONS INSTITUTE (GREATER MIAMI

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 DEC -5 PM 4:58

0004885

Principal Place of Business	Mailing Address
12973 SW 112TH ST STE #223 MIAMI FL 33186 US	5201 BLUE LAGOON DR STE #100 MIAMI FL 33126-2065 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	201 ALHAMBRA CIRCLE
Suite, Apt. #, etc.	Suite, Apt. #, etc. 1102
City & State	City & State CORAL GABLES, FL
Zip / Country	Zip 33134 / Country MIAMI-DADE

4. FEI Number 59-1804339 ☐ Applied For ☐ Not Applicable

☑ 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
DE LA CAMARA, ROSA BECKER & POLIAKOFF 5201 BLUE LAGOON DR STE 100 MIAMI FL 33126	Name DAVID B. ISRAEL Street Address (P.O. Box Numbers Not Acceptable) 201 ALHAMBRA CIRCLE SUITE 1102 City CORAL GABLES FL Zip Code 33134

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.

200003500922--2
-12/14/00--01016--019
****183.75

SIGNATURE David Israel DAVID B. ISRAEL 12/10/00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 13, 2000 min. will be $236.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GONZALEZ, MARIO J. 14750 PALMETTO FRONTAGE RD STE 120 MIAMI LAKES FL 33016	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition Lee Santibanez 1801 South Bayshore Lane Coconut Grove, Florida 33133
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD AMOS, LINDA 2745 W. CYPRESS CREEK RD. FT. LAUDERDALE FL 33309	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition Cynthia Clemens 137 Golden Isles Drive, #1608 Hallandale, Florida 33009
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SALVAT, KAREN 12350 S.W. 132 COURT, #209 MIAMI FL 33186-6458	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition Myra Klein 3745 N.E. 171 Street, #29 North Miami Beach, Florida 33160
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD REHR, MICHAEL 220 MIRACLE MILE, SUITE 238 CORAL GABLES FL 33134-6734	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition Gil Neuman 3661 North 52 Avenue Hollywood, Florida 33021
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JASON, JERRY 11578 SW 132ND AVE MIAMI FL 33186	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition Joseph Vos 888 Brickell Key Drive, Apt. 1508 Miami, Florida 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DELACAMARA, ROSA 5201 BLUE LAGOON DRIVE, SUITE 100 MIAMI FL 33126-2065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition REINSTATEMENT 200003500922--2 -12/14/00--01016--020

CR2E037 (5/00)

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 a director or officer 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: [illegible] REQUIRED 10/10/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #