2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State
03-20-2003 90148 026 ****61.25

DOCUMENT # 755002

1. Entity Name
MIAMI CHAPTER OF THE AMERICAN INSTITUTE OF ARCHI TECTS, INC.

Principal Place of Business	Mailing Address
3399 PONCE DE LEON BLVD STE 104 CORAL GABLES FL 33134	3399 PONCE DE LEON BLVD STE 104 CORAL GABLES FL 33134

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
275 UNIVERSITY DRIVE Suite, Apt. #, etc.	~~Address~~ 275 UNIVERSITY DRIVE Suite, Apt. #, etc.
City & State: CORAL GABLES FLORIDA	City & State: CORAL GABLES, FLORIDA
Zip: 33141 Country: U.S.A	Zip: 33141 Country: U.S.A

4. FEI Number 59-6151172 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BRAZLAVSKY, MIJEL
3399 PONCE DE LEON BLVD
STE 104
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name: MIJEL BRAZLAVSKY
Street Address (P.O. Box Number is Not Acceptable): 275 UNIVERSITY DRIVE
CORAL GABLES
City: CORAL GABLES FL Zip Code: 33141

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

FILE NOW: FEE IS $61.25

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BERNARD, ZYSCOVICH 1 W N BISCAYNE BLVD 27TH FLOOR MIAMI FL 33132	☐ Delete	PD BERNARD, ZYSCOVICH 100 N. BISCAYNE BLVD 27TH FLOOR MIAMI FL 33132.	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FORBES R, JOHN 4565 PONCEDELEON BLVD SUITE 100 CORAL GABLES FL 33146	☐ Delete	VPD. MARTIN DIAZ-YABOR 12124 S.W 131 AVE MIAMI FL 33186	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD YABOR, MARTIN DIAZ 12124 S W 131 AVE MIAMI FL 33186	☐ Delete	VPD LOURDES SOLERA 2780 SW DOUGLAS Rd #302 CORAL GABLES, FL 33134.	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SARVI, ANGEL II VPD 2801 PONCE DE LEON BLVD. #880 CORAL GABLES FL 33134	☐ Delete	VPD ANGEL SARVI II. 2801 PONCEDELEON BLVD #880 CORAL GABLES, FL 33134.	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD LOURNES, SOLERA 2780 S W DOUGLAS RD #302 MIAMI FL 33132	☐ Delete	STD. DAPHNE GURRI 801 MONTEREY ST # 201A. CORAL GABLES, FL 33134	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/02)

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 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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR