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## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Sep 06, 2001 8:00 am Secretary of State **DOCUMENT # 759684** 09-06-2001 90011 032 \*\*\*\*61.25 MUSEUM OF CONTEMPORARY ART, INC. Principal Place of Business Mailing Address 770 NE 125TH ST. 770 NE 125TH ST. NORTH MIAMI FL 33161-5654 NORTH MIAMI FL 33161-5654 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2085261 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CLEARWATER, BONNIE 770 NE 125TH ST. NORTH MIAMI FL 33161 City Zip Code FL 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. SIĞNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be After September 12, 2001, min. will be \$236.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Brice- Stewyurer Secretary Brown, Jacquelyn TITLE TITLE Change Addition (2/01) LAURIE, WYNN NAME NAME PAINE WEBER 20803 BISCAYNE BLVD. #500 25 Pelican Drive STREET ADDRESS STREET ADDRESS **CR2E037** CITY-ST-ZIP **AVENTURA FL 33180** CITY-ST-ZIP FL 33301 TD TITLE ☐ Delete TITLE Addition FABRICANT, LORETTA NAME STREET ADDRESS 100 SE 2ND ST #3910 STREET ADDRESS MIAMI\_FL 33131\_ CITY-ST-ZIP CITY-ST-ZIP TITI F **X** Delete TITLE ☐ Change **Addition** IRELAND, NATALIE Tchinnocian, Monica 7752 Fisher Island Drive Fisher Island, PL 33109 NAME NAME 11111 BISCAYNE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP N MIAMI FL CITY-ST-ZIP TITLE ☐ Delete TITLE VC. ☐ Change Addition Simkins, Anna 3640 Yacut Club Drive #1702 BRAMAN, IRMA NAME NAME STREET ADDRESS ONE INDIAN CREEK ISLAND STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33154 CITY-ST-ZIP North Miam Beach, FL 33180 TITLE ☐ Delete TITLE Change ☐ Addition CLEARWATER, BONNIE NAME NAME STREET ADDRESS 770 NE 125TH STREET STREET ADDRESS CITY-ST-ZIP NORTH MIAMI FL 33161 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

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.

305-893-6211