2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N0000006484

Entity Name: THE MIAMI-DADE CHARTER FOUNDATION, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6245 NORTH FEDERAL HIGHWAY 5TH FLOOR FORT LAUDERDALE, FL 33308

Current Mailing Address: New Mailing Address:

6245 NORTH FEDERAL HIGHWAY 5TH FLOOR FORT LAUDERDALE, FL 33308

FEI Number: 31-1748543 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POZZUOLI, EDWARD J ESQ C/O TRIPP SCOTT PA 110 SE 6TH STREET 15TH FLOOR FORT LAUDERDALE, FL 33301

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 P/D
 (X) Change () Addition

 Name:
 JONES, JESSE
 Name:
 BERRONES, EDUARDO MR

 Address:
 6540 NW 35TH AVENUE
 Address:
 47 NORTH KROME AVENUE

 City-St-Zip:
 MIAMI, FL 33147
 City-St-Zip:
 HOMESTEAD, FL 33030

 Title:
 D () Delete
 Title:
 S/D (X) Change () Addition

 Name:
 SINGLETON, H W
 Name:
 PROKOS, CECILIA

 Address:
 1750 NE 167TH STREET
 Address:
 1414 NE 177 STREE

City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: NORTH MIAMI BEACH, FL 33162

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

Name: POZZUOLI, EDWARD J Name: THURSTON, MAXINE
Address: 110 SE 6TH STREET 15TH FL Address: 1175 NE 125TH STREET, SUITE 614

City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: NORTH MIAMI, FL 33161

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: EDUARDO BERRONES P/D 04/30/2003