

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 05, 2002 8:00 am**  
**Secretary of State**

08-05-2002 90003 038 \*\*\*\*61.25

**DOCUMENT # N01000001897**

1. Entity Name

**THE KIWANIS CLUB OF FLAMINGO-HIALEAH FOUNDATION, INC.**

Principal Place of Business

Mailing Address

**1480 W 5TH CT  
HIALEAH FL 33010**

**1480 W 5TH CT  
HIALEAH FL 33010**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-1097678**

Applied For

Not Applicable

5. 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

**SANCHEZ, FELIX  
4160 W 16 AVE SUITE 401  
HIALEAH FL 33012**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

**After September 13, 2002,  
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	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	PD	SANCHEZ, FELIX	1480 W 5TH CT HIALEAH FL 33010	<input type="checkbox"/>						
	SD	ROBAINA, JULIO	499 W 23 ST HIALEAH FL 33010	<input type="checkbox"/>						
	TD	GONZALEZ, EDUARDO	545 W 63 ST HIALEAH FL 33012	<input type="checkbox"/>						
	VD	GONZALEZ, WILFREDO	545 W 63 ST HIALEAH FL 33012	<input type="checkbox"/>						
	VD	GARCIA, RENE	217 E 63 ST HIALEAH FL 33012	<input type="checkbox"/>						
				<input type="checkbox"/>						

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** Sanchez

7/29/02

(305) 885-5418

CR2E037 (4/02)