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

1/2

FILED
Feb 26, 2003 8:00 am
Secretary of State
01-23-2003 90211 011 ****70.00

DOCUMENT # N02000000271

1. Entity Name
CORAL WAY COLOMBIAN LIONS CLINIC, INC.

Principal Place of Business	Mailing Address
11510 S W 92ND STREET MIAMI FL 33176	11510 S W 92ND STREET MIAMI FL 33176

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
11865 SW 26 ST	8241 SW 32 TER
Suite, Apt. #, etc. # G-10	Suite, Apt. #, etc. MIAMI FL 3
City & State MIAMI FL	City & State MIAMI FL
Zip 33175 Country USA	Zip 33155 Country DADE

4. FEI Number 80-0026661 ☐ 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
AARON, JAIRO 11510 S W 92ND STREET MIAMI FL 33176	Name LUIS OLARTE Street Address (P.O. Box Number is Not Acceptable) 16455 SW 236 ST City HOMESTEAD FL Zip Code 33131

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 J Olarte 1-13-03
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	PCEO AARON, MAIRO 11510 S W 92ND STREET MIAMI FL 33176	☐ Delete	P LUIS OLARTE 14470 SW 145 PL HOMESTEAD FL 33031	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AARON, MAIRO 11510 S W 92ND STREET MIAMI FL 33176	☐ Delete	S LEYDA ESCOBAR 8365 SW 39TER MIAMI FL 33155	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FARKAS, YAZMIN 8241 S W 32ND TERRACE MIAMI FL 33155	☐ Delete	T YAZMIN FARKAS 8241 SW 32 TER MIAMI FL 33155	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD OLARTE, LUIS 14470 S W 145TH PLACE MIAMI FL 33186	☐ Delete	D ELENA BEDOYA 3015 NW 83 TER MIAMI FL 33147	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D YOLANDA RIVERS 9885 NW 52 TER MIAMI FL 33178	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D ALICIA FARKAS 8241 SW 32 TER MIAMI FL 33155	☐ 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 1-13-03 305-5512494
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #