2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2009
Secretary of State

DOCUMENT# N04000006610

Entity Name: CBG OF MIAMI-DADE COUNTY AND VICINITY, INC.

Current Principal Place of Business:

6001 NW 8TH AVENUE
MIAMI, FL 33127 US

New Principal Place of Business:

Current Mailing Address:

6001 NW 8TH AVENUE
MIAMI, FL 33127 US

New Mailing Address:

FEI Number: 20-1348951 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WILLIS, JOAQUIN DR.
6001 NW 8TH AVENUE
MIAMI, FL 33127 US

Name and Address of New Registered Agent:

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:

Title: D, P ( ) Delete
Name: WILLIS, JOAQUIN DR.
Address: 6001 NW 8TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: VP D ( ) Delete
Name: SMITH, GASTON
Address: 740 NW 58 STREET
City-St-Zip: MIAMI, FL 33127

Title: D, S ( ) Delete
Name: RICHARDSON, WALTER T DR.
Address: 17201 SW 103 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: HOLTS, RANDALL
Address: 1881 NW 103 STREET
City-St-Zip: MIAMI, FL 33147

Title: T, D ( ) Delete
Name: BROWN, JIMMIE
Address: 2001 NW 35 STREET
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP D (X) Change ( ) Addition
Name: JONES, ERIC
Address: 6001 NW 8TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: D, S (X) Change ( ) Addition
Name: MITCHELL, CHARLES
Address: 6001 NW 8TH AVENUE
City-St-Zip: MIAMI, FL 33127

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHARLES MITCHELL DS 06/23/2009

Electronic Signature of Signing Officer or Director — Date