

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N06309

FILED
May 01, 2003
Secretary of State

Entity Name: SHIRLEY L. MILLER CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

2601 BISCAYNE BLVD.
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

2601 BISCAYNE BLVD.
MIAMI, FL 33137

New Mailing Address:

FEI Number: 59-2469316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, ANTONIO
2601 BISCAYNE BLVD
MIAMI, FL 33137 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: DP () Delete
Name: MILLER, IRVING,
Address: 2601 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL

Title: DT () Delete
Name: GERSTEN, SHERRI,
Address: 2601 BISCAYNE BLVD
City-St-Zip: MIAMI, FL

Title: DS () Delete
Name: GOLDSTEIN, MICHELLE,
Address: 2601 BISCAYNE BLVD
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: IRVING MILLER

DP

05/01/2003

Electronic Signature of Signing Officer or Director

_____ Date