

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19208

Entity Name: TRANSPLANT FOUNDATION, INC.

FILED  
Jan 14, 2004  
Secretary of State

## Current Principal Place of Business:

1150 NW 14TH ST.  
STE. 209B  
MIAMI, FL 33136

## New Principal Place of Business:

1801 NW 9TH AVE.  
STE. 150B  
MIAMI, FL 33136

## Current Mailing Address:

% JEFFREY BARASH  
1140 KANE CONCOURSE  
BAY HARBOR, FL 33154

## New Mailing Address:

FEI Number: 59-2767754      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARASH, A. JEFFREY  
BARASH & ASSOCIATES, P.A.  
1140 KANE CONCOURSE  
BAY HARBOR, FL 33154 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 ( ) Delete  
Name: COKER, DONNIE  
Address: 1067 N.W. 155TH TERRANCE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: PD ( ) Delete  
Name: GOMEZ, IVAN  
Address: 601 BRICKELL KEY DR STE 507  
City-St-Zip: MIAMI, FL 33131

Title: PDDC ( ) Delete  
Name: BARASH, A. JEFFREY  
Address: 1140 KANE CONCOURSE  
City-St-Zip: MIAMI, FL 33154

Title: TD ( ) Delete  
Name: LOWENSTEIN, ELLIOT  
Address: 2100 SALZEDO ST. STE. 303  
City-St-Zip: COROL GABLES, FL 33134

Title: PED ( ) Delete  
Name: ALTERMAN, PAUL  
Address: 7850 N.W. 5TH PL  
City-St-Zip: PLANTATION, FL 33324

Title: SD ( ) Delete  
Name: WEINBERG, MARCY  
Address: 3990 SHORIDIAN ST. SUITE 204  
City-St-Zip: HOLLYWOOD, FL 33021

## 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:

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

Title: PD (X) Change ( ) Addition  
Name: ALTERMAN, PAUL  
Address: 7850 N.W. 5TH PL  
City-St-Zip: PLANTATION, FL 33324

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: A. JEFFREY BARASH

D

01/14/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date