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

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)					FILED Jul 10, 2003 8:00 am			
DOCU 1. Entity Nam	MENT # N24348			Secretary of State				
THE COR	NELL CLUB OF THE GOLD CO	AST INC.			07-	-10-2003 9011	9 003 70.C	
20609 NE 6 COURT 20609		Mailing Address 20609 NE 6TH CT MIAMI FL 33179 US			A HERRITON DIRE TROUT	01000 (1191 0100 9 1 0 11 0	ING NIGHT BURGE BURGE BURGE	i
2. Principal Place of Business 3. Ma		Mailing Address						
Suite, Apt. #, etc. S		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & Stat	е	City & State		4.	FEI Number 65 -	0037866	⊢	plied For t Applicable
Zip	Country	Zip	Country	5.	Certificate of Stat	us Desired	\$8.75 Add Fee Required	
	6. Name and Address of Current Re	gistered Agent		7.	Name and Addre	ss of New Regist	ered Agent	
	3 1-40.5		Name		- ;			
BLACK, [DANA L		Street Ad	ddress (P.O. E	Box Number is No	t Acceptable)	_ _	
20609 NE	E 6TH CT							
MIAMI FL	. 33179		1]
			City		· · · · · · · · ·		FL Zip Code	•
SIGNATURE	Signature, typed or printed name of registered agent and FILE NOW: FEE IS \$61.25 tember 10, 2003, min will be \$236	9. Election Camp	•	 \$5.	einstating) OO May Be	Make C	DATE	
Aitei Sepi							epartment of S	
10.	OFFICERS AND DIREC		11.	PD	FIONS/CHANGES	TO OFFICERS A	ND DIRECTORS IN	
TITLE NAME	D Zippin, bette	☐ Delete	TITLE NAME	_*		00	Change	Addition
	4110 NW 73 AVENUE		STREET ADDRESS	Dova	12 2 W	PFEIF	ACE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33319		CITY-ST-ZIP				FL 333	2 2
TITLE	TD	☐ Delete	TITLE	. 0		J.K.B.K.C.G	☐ Change	Addition
NAME	BLACK, DANA L	Dollic	NAME					
STREET ADDRESS	20609 NE 6TH CT		STREET ADDRESS					ĺ
CITY-ST-ZIP	MIAMI FL 33179		CITY-ST-ZIP					
.TITLE _	D .	Delete	TITLE .				☐ Change	Addition
NAME	REISFELD, ERINC	•	NAME					}
STREET ADDRESS	820 NW 121 AVENUE		STREET ADDRESS					
CITY-ST-ZIP	PLANTATION FL 33325		CITY-ST-ZIP					
TITLE	D Deardon, Elizabeth	□ Delete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS	1650 N RIVERSIDE DRI #6		NAME STREET ADDRESS					
CITY-ST-ZIP	POMPANO BEACH FL 33062		CITY-ST-ZIP					
	1 Out AND DEADLITE SOUR	□ B.1.1.					☐ Change	Addition
TITLE NAME		☐ Delete	TITLE NAME				□ Change	C) Addition
STREET ADDRESS		ĺ	STREET ADDRESS					j
CITY-ST-ZIP			CITY-ST-ZIP				•	
TITLE		☐ Delete	TITLE				☐ Change	Addition

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 attache nt with an address, with all other like empowered.

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP