2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State
03-25-2002 90141 001 ****61.25

DOCUMENT # N26893

1. Entity Name

GREATER SEVENTH AVENUE IMPROVEMENT ASSOCIATION, INC.

Principal Place of Business	Mailing Address
KRESSLY CORPORATION 746 N W 107TH ST MIAMI FL 33168 US	KRESSLY CORPORATION 746 N W 107TH ST MIAMI FL 33168 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0085243 — 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
KRESSLY, D. E. W. 746 N W 107TH ST C/O KRESSLY CORP MIAMI FL 33168	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE D

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 Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P ☒ Delete	TITLE	PRESIDENT ☒ Change ☐ Addition
NAME	KRESSLY, DON	NAME	SANDRA FERNANDEZ
STREET ADDRESS	746 NW 107TH ST	STREET ADDRESS	13156 N.W. 7 AVE
CITY-ST-ZIP	MIAMI FL 33168	CITY-ST-ZIP	NORTH MIAMI, FLA 33168
TITLE	T ☐ Delete	TITLE	DIRECTOR ☐ Change ☒ Addition
NAME	COBO, BLANCA	NAME	DONALD KRESSLY
STREET ADDRESS	13490 NW SEVENTH AVE.	STREET ADDRESS	746 N.W 107 ST.
CITY-ST-ZIP	NORTH MIAMI FL	CITY-ST-ZIP	MIAMI, FLA 33168
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	WIBORG, JIM	NAME	
STREET ADDRESS	12566 N W 7TH AVENUE	STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI FL 33168	CITY-ST-ZIP	
TITLE	VP ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	GITLAN, RON	NAME	
STREET ADDRESS	10992 NW SEVENTH AVE	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	CITY-ST-ZIP	
TITLE	S ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ISLANDE, SALOMON	NAME	
STREET ADDRESS	14733 W DIXIE HWY	STREET ADDRESS	
CITY-ST-ZIP	N MIAMI FL 33181	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	LANGER, ROGER	NAME	
STREET ADDRESS	8901 N W 7 AVE	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33150	CITY-ST-ZIP	

CR2E037 (9/01)

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: Blanca M. Cobo BLANCA M. COBO TREAS. 3/12/02 305-685 2444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #