

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90643 002 ****61.25

DOCUMENT #

N33016

1. Entity Name

ELIER DACAL FOUNDATION, INC.

Principal Place of Business

9915 West Okeechobee Rd.

Apt. 505

Hialeah Gardens, FL 33016

Mailing Address

9915 West Okeechobee Rd.

Apt. 505

Hialeah Gardens, FL 33016

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

650128946

Not Applicable

Zip

Country

Zip

Country

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

Saray Dacal

9915 West Okeechobee Road

Apt., 505

Hialeah Gardens, FL 33016

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

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 President/Director ☐ Delete
NAME Saray Dacal
STREET ADDRESS 9915 W. Okeechobee Rd., Apt. 505
CITY-ST-ZIP Hialeah Gardens, FL 33016

TITLE Director ☐ Change ☒ Addition
NAME John W. Stackhouse, Jr
STREET ADDRESS 9915 W. Okeechobee Rd., Apt. 505
CITY-ST-ZIP Hialeah Gardens, FL 33016

TITLE Director ☐ Delete
NAME Thomas J. Dimino, M.D.
STREET ADDRESS 11651 S.W. 64th Avenue
CITY-ST-ZIP Miami, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Director ☐ Delete
NAME Mary M. Stuart
STREET ADDRESS 11651 S.W. 64th Avenue
CITY-ST-ZIP Miami, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Director ☐ Delete
NAME Terry Fairfield
STREET ADDRESS 14561 S.W. 146 Place
CITY-ST-ZIP Miami, FL 33186

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/100)