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

## DOCUMENT # N33016

1. Entity Name

ELIER DACAL FOUNDATION, INC.



## FILED Apr 14, 2003 8:00 am Secretary of State

04-14-2003 90220 013 \*\*\*\*61.25

|   |  |  |  |   | 600 WE 190                                 | \   |   |                                |  |   |  |
|---|--|--|--|---|--|---|---|--------------------------------|--|---|--|
| Principal Plac<br>20301 SW 106<br>MIAMI FL 3318<br>US   | TH AVENUE  |  | Mailing Address<br>20301 SW 106TH AVENUE<br>MIAMI FL 33189<br>US | Ē   |  | 111   | PENNIN DIR NUGI N                                   | liki dalah kirir riki dial     | ) A(A) A(A) A(A)   | 13)) (12)) (13))                                    |  |
| 2. Principal Place of Business  |  | 3. Mailing Address   |  |   |  |   |   |                                |  |   |  |
| Suite, Apt. #, etc.   |  |  | Suite, Apt. #, etc.  |   |  |   | ☐ CHECK HERE IF MAKING CHANGES                      |                                |  |   |  |
| City & State  |  |  | City & State   |   |  | 4. FEI N                                      | 4. FEI Number 65-0128946 Applied For Not Applied be |                                |  |   |  |
| Zip Country   |  | Zip Coun   |  | ıntry   | 5. Certifi                                 | 5. Certificate of Status Desired              |   | \$8.75 Additional Fee Required |  |   |  |
|   |  | and Address of Current R   | enistered Agent  |   |  | - 7 Name                                      | and Address   | of New Register                |  |   |  |
|   | 0. Hame  | and Fladiosa of Carrent  | ogiolos de rigotic — —   |   | ~Name →                                    |   |   |                                |  |   |  |
| DACAL 9   | CADAV  |  |  |   |  |   |   |                                |  |   |  |
| DACAL, SARAY<br>9915 WEST OKEECHOBEE RD, APT 505<br>HIALEAH GARDENS FL 33016  |  |  |  | Street Addres   | Idress (P.O. Box Number is Not Acceptable) |   |   |                                |  |   |  |
|   |  |  | -  |   | 2 4 2 4                                    | / 6 //  | 1 1017  | har                            |  | -   |  |
| MALEAT GAILBERG TE 00010  |  |  |  |   | 1301 S.W. 106 Th ave                       |   |   |                                |  |   |  |
|   |  |  |  | City MIA  | MIAMI                                      |   |   | FL   ~333                      | ") 89  |   |  |
| 8. The above  | named entity   | submits this statement for   | the purpose of changing its                                      | register  | ed office or regis                         | stered agent, c                               | or both, in the S                                   | State of Florida. I            | am familiar with,  | and accept  |  |
| the obligat   | tions of registe   | ered agent.  |  |   | •  |   |   |                                |  |   |  |
|   |  |  |  |   |  |   |   |                                |  |   |  |
| SIGNATURE .   |  |  | <del></del> -  |   |  | ···.  |   | <del></del>                    | <del></del>  |   |  |
|   | Signature, typed o   | or printed name of registered agent an   | id title if applicable. (NOT                                     | E: Registere  | d Agent signature requ                     | uired when reinstatin                         | ig)   | DAT                            | TE   |   |  |
|   |  |  |  |   |  |   |   |                                | -  |   |  |
| FILE NOW: FEE IS \$61.25  |  |  | 9. Election Campaign Financing                                   |   |  | \$5.00 N                                      | lav Re  | Make Ch                        | eck Payable  | to  |  |
|   |  | 1 LL 13 901.23   | T 10 14 4  | A   |  |   |   |                                |  | II  |  |
| •   |  | 7 LL 13 901.23   | Trust Fund (   | Contribut   | on.  | Added to F                                    |   | Florida Der                    | partment of  | II  |  |
|   |  | *  |  |   | ion.                                       | Added to F                                    | Fees  |                                |  | State   |  |
| 10. ~   |  | OFFICERS AND DIRE  | ECTORS   | 11.   |  | Added to F                                    | Fees  | Florida Dep                    | DIRECTORS IN   | State   |  |
| 10.   | PD   | OFFICERS AND DIRE  |  | <b>11.</b>  | . P  | Added to F  ADDITIONS  D                      | ees<br>CHANGES T                                    | O OFFICERS AND                 | DIRECTORS IN   | State   |  |
| 10. ~   | PD<br>DACAL, SA  | OFFICERS AND DIRI  | ECTORS Delete  | 11.   | . P  | Added to F  ADDITIONS  D                      | ees<br>CHANGES T                                    | O OFFICERS AND                 | DIRECTORS IN   | State   |  |
| 10.   | PD<br>DACAL, SA<br>9915 WES  | OFFICERS AND DIRE  | ECTORS Delete  | 11.<br>TITLI<br>NAM<br>STRE   | . P  | Added to F  ADDITIONS  D                      | ees<br>CHANGES T                                    |                                | DIRECTORS IN   | State   |  |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP   | PD<br>DACAL, SA<br>9915 WES  | OFFICERS AND DIRE  | ECTORS  Delete  PT 505   | 11.<br>TITLI<br>NAM<br>STRE   | E P E D ET ADDRESS 2 -ST-ZIP N             | Added to F  ADDITIONS  D                      | ees<br>CHANGES T                                    | O OFFICERS AND                 | DIRECTORS IN   | State   |  |
| 10.  TITLE  NAME  STREET ADDRESS  | PD<br>DACAL, SA<br>9915 WES<br>HIALEAH O   | OFFICERS AND DIRE<br>ARAY<br>T OKEECHOBEE RD, AI<br>SARDENS FL 33016   | ECTORS Delete  | 11.<br>TITLI<br>NAM<br>STRE<br>CITY   | E P E D ET ADDRESS 2 -ST-ZIP M             | Added to F  ADDITIONS  D                      | ees<br>CHANGES T                                    | O OFFICERS AND                 | DIRECTORS IN Change  | State N 10 Addition                                 |  |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP NITLE   | PD<br>DACAL, SA<br>9915 WES<br>HIALEAH O   | OFFICERS AND DIRE  ARAY  T OKEECHOBEE RD, AI  BARDENS FL 33016  HOMAS J MD   | ECTORS  Delete  PT 505   | 11. TITLI NAM STRE CITY TITLI   | E P E D ET ADDRESS 2 -ST-ZIP M             | Added to F  ADDITIONS  D                      | ees<br>CHANGES T                                    | O OFFICERS AND                 | DIRECTORS IN Change  | State N 10 Addition                                 |  |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME  | PD<br>DACAL, SA<br>9915 WES<br>HIALEAH O<br>D<br>DIMINO, TI  | OFFICERS AND DIRE  ARAY  T OKEECHOBEE RD, AI  BARDENS FL 33016  HOMAS J MD   | ECTORS  Delete  PT 505   | 11. TITLI NAM STRE CITY TITLI NAM STRE  | E P E D ET ADDRESS 2 -ST-ZIP M             | Added to F  ADDITIONS  D                      | Fees<br>C/CHANGES TO                                | O OFFICERS AND                 | DIRECTORS IN Change  | State N 10 Addition                                 |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP NITLE NAME STREET ADDRESS   | PD<br>DACAL, SA<br>9915 WES<br>HIALEAH O<br>DIMINO, TI<br>11651 SW<br>MIAMI FL   | OFFICERS AND DIRI<br>ARAY<br>T OKEECHOBEE RD, AI<br>GARDENS FL 33016<br>HOMAS J MD<br>64TH AVE   | ECTORS  Delete  PT 505   | 11. TITLI NAM STRE CITY TITLI NAM STRE  | E P D D D D D D D D D D D D D D D D D D    | Added to F  ADDITIONS  D                      | Fees<br>C/CHANGES TO                                | O OFFICERS AND                 | DIRECTORS IN Change  | State N 10 Addition                                 |  |
| 10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  NITLE  NAME  STREET ADDRESS  CITY-ST-ZIP   | PD DACAL, SA 9915 WES HIALEAH ( D DIMINO, TI 11651 SW MIAMI FL D STUART, M   | OFFICERS AND DIRE  ARAY T OKEECHOBEE RD, AI GARDENS FL 33016 HOMAS J MD 64TH AVE   | ECTORS  Delete  Delete   | 11. TITLI NAM STRE CITY TITLI NAM STRE  | E P D D D D D D D D D D D D D D D D D D    | Added to F  ADDITIONS  D                      | Fees<br>C/CHANGES TO                                | O OFFICERS AND                 | DIRECTORS IN Change  | State  N 10  Addition  Addition                     |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | PD DACAL, SA 9915 WES HIALEAH ( D DIMINO, TI 11651 SW MIAMI FL D STUART, M 11651 SW  | OFFICERS AND DIRE  ARAY T OKEECHOBEE RD, AI GARDENS FL 33016 HOMAS J MD 64TH AVE   | ECTORS  Delete  Delete   | 11. TITLI NAM STRE CITY TITLI NAM STRE  | E P D D D D D D D D D D D D D D D D D D    | Added to F  ADDITIONS  D                      | Fees<br>C/CHANGES TO                                | O OFFICERS AND                 | DIRECTORS IN Change  | State  N 10  Addition  Addition                     |  |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME  | PD DACAL, SA 9915 WES HIALEAH C D DIMINO, TI 11651 SW MIAMI FL D STUART, M 11651 SW MIAMI FL D FAIRFIELD                                       | OFFICERS AND DIRI ARAY T OKEECHOBEE RD, AI GARDENS FL 33016 HOMAS J MD 64TH AVE MARY M 64TH AVE  | Delete  PT 505  Delete  Delete                                   | 11. TITLI NAM STRE CITY TITLI NAM STRE -CITY TITLI NAM STRE CITY TITLI NAM  | E P D D D D D D D D D D D D D D D D D D    | Added to F  ADDITIONS  D                      | ees<br>CHANGES T                                    | O OFFICERS AND                 | DIRECTORS IN Change  | State  N 10  Addition  Addition                     |  |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP  NITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP   | PD DACAL, SA 9915 WES HIALEAH ( D DIMINO, TI 11651 SW MIAMI FL D STUART, M 11651 SW MIAMI FL D FAIRFIELD 14561 SW MIAMI FL                     | OFFICERS AND DIRI<br>ARAY<br>T OKEECHOBEE RD, AI<br>GARDENS FL 33016<br>HOMAS J MD<br>64TH AVE<br>MARY M<br>64TH AVE                         | Delete  Delete  Delete  Delete                                   | 11. TITLI NAM STRE CITY TITLI NAM STRE CITY TITLI NAM STRE CITY TITLI NAM STRE CITY   | E P D D D D D D D D D D D D D D D D D D    | Added to F  ADDITIONS  D  ACAL,  OBOI  (IAMI, | SARAY<br>S.W.<br>FL                                 | O OFFICERS AND                 | DIRECTORS IN Change  Change  Change  Change  | State  N 10  Addition  Addition  Addition           |  |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  NITUE  NIME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  TITLE  NAME  TITLE   | PD DACAL, SA 9915 WES HIALEAH ( D DIMINO, TI 11651 SW MIAMI FL D STUART, M 11651 SW MIAMI FL D FAIRFIELD 14561 SW MIAMI FL D                   | OFFICERS AND DIRI  | Delete  PT 505  Delete  Delete                                   | 11. TITLI NAM STRE CITY   | E P D D D D D D D D D D D D D D D D D D    | Added to F  ADDITIONS  D  ACAL,  OBOI  (IAMI, | SARAY<br>S.W.<br>FL                                 | O OFFICERS AND                 | DIRECTORS IN Change  Change  Change  Change  | State  N 10  Addition  Addition                     |  |
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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:

Salandaled PDD QUSAZA

DACAG

APRIL 10-03

305-253-9213