2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2007
Secretary of State

DOCUMENT# N35241

Entity Name: MIAMI LITTLE RIVER LIONS CLUB, INC.

Current Principal Place of Business:

470 NE 167TH STREET
NORTH MIAMI BEACH, FL 33162 US

New Principal Place of Business:

Current Mailing Address:

MARK GLICKSMAN
PO BOX 640043
MIAMI, FL 33164 US

New Mailing Address:

FEI Number: 59-6170042 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLICKSMAN, MARK
470 NE 167TH STREET
MIAMI, FL 33162 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: VD ( ) Delete
Name: ROSARIO, JOHN
Address: 2801 SW 195 TERR
City-St-Zip: MIRAMAR, FL 33029

Title: ST ( ) Delete
Name: ROSARIO, DEBBIE
Address: 2801 SW 195 TERR
City-St-Zip: MIRAMAR, FL 33029

Title: P ( ) Delete
Name: GLICKSMAN, MARK
Address: 470 NE 167TH ST.
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: D ( ) Delete
Name: PENZI, JR., LOU
Address: 2903 POINT GOSS DR. #K412
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: ROSARIO, JOHN
Address: 2801 SW 195 TERR
City-St-Zip: MIRAMAR, FL 33029

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

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

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 Chapter 119, 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: MARK GLICKSMAN P 04/01/2007

Electronic Signature of Signing Officer or Director — Date