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

Jan 24, 2003 8:00 am **Secretary of State** DOCUMENT # . **N38885** 1. Entity Name 01-24-2003 90049 011 ****61.25 ADORNO & ZEDER EMPLOYEES CHARITABLE FOUNDATION, INC. Principal Place of Business Mailing Address 2601 S. BAYSHORE DR. 2601 S. BAYSHORE DR. SUITE 1600 SUITE 1600 MIAMI FL 33133 MIAM! FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 65-0202632 Not Applicable Zip \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **GUERRA. PHILLIP** Street Address (P.O. Box Number is Not Acceptable) 2601 S BAYSHORE DRIVE **SUITE 1600 MIAMI FL 33133** City Zip Code Fi 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. CR2E037 (10/02) TITLE ☐ Delete TITLE Change Addition ADORNO, HENRY N. NAME NAME STREET ADDRESS 2601 S BAYSHORE DR,#1600 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 🔼 Delete TITLE TITLE Change Addition ZEDER, JON W. NAME NAME 2601 S BAYSHORE DR,#1600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Delete TITLE TITLE ☐ Change Addition YOSS, GEORGE T NAME NAME STREET ADDRESS 2601 S BAYSHORE DR,#1600 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33133** CITY-ST-ZIP Delete TITLE TITLE XXX Change ☐ Addition P,T GUERRA, PHILLIP NAME NAME 2601 S. BAYSHORE ADRIVE, STE. 1600 STREET ADDRESS STREET ADDRESS **MIAMI FL 33133** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS

12. Thereby certify that the information sosplied with this filling 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 attachme like empowered. Cece Phillip Guerra , Président 1/15/03 (305) 860-7015

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP