2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2001 8:00 am
Secretary of State
01-30-2001 90104 001 ****70.00

DOCUMENT # N39197

1. Entity Name

DADE COUNTY CULTURAL ALLIANCE INC.

Principal Place of Business	Mailing Address
PO BOX 370742 MIAMI FL 33137-0742	PO BOX 370742 MIAMI FL 33137-0742

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 65-0309539 — 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
SLESNICK, DM 10680 NW 25 ST STE 202 MIAMI FL 33172	Name: John Casbarro Street Address (P.O. Box Number is Not Acceptable): 5532 SW 11th Avenue City: Cooper City FL Zip Code: 33330

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: John Casbarro — 1-22-01
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: D NAME: APFEL, KAY STREET ADDRESS: 777 BRICKEL, STE 1130 CITY-ST-ZIP: MIAMI FL	☒ Delete	TITLE: D NAME: Chair D STREET ADDRESS: Lilia Garcia CITY-ST-ZIP: 1500 Biscayne Blvd Room 317 Miami Fl 33132	☐ Change ☒ Addition
TITLE: TD NAME: LAURA BRUNEY STREET ADDRESS: 200 S BISCAYNE BLVD #4500 CITY-ST-ZIP: MIAMI FL	☐ Delete	TITLE: D NAME: Co-Chair D STREET ADDRESS: Mel Morgenstern CITY-ST-ZIP: 100 SE 2nd St #2800 Miami Fl 33131	☐ Change ☒ Addition
TITLE: D NAME: GUBER, SUSAN STREET ADDRESS: 5500 SW 86 ST CITY-ST-ZIP: MIAMI FL	☒ Delete	TITLE: D NAME: Vice Chair D STREET ADDRESS: David Ait CITY-ST-ZIP: 4400 NE 50 Terr Miami Fl 33137	☐ Change ☒ Addition
TITLE: PDC NAME: LEVITT, RON STREET ADDRESS: SEVILLA AVE CITY-ST-ZIP: CORAL GABLES FL	☒ Delete	TITLE: D NAME: Secretary D STREET ADDRESS: Clay Hamilton CITY-ST-ZIP: 11630 SW 136 Terr Miami Fl 33176	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

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: [illegible] — 1-20-01 — 305-995-1912
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #