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Apr 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N41241** (3)

1. Corporation Name

ELLIOT DINNERSTEIN FOUNDATION, INC.

Principal Place of Business

Mailing Address

1320 S. DIXIE HWY.
SUITE 830
CORAL GABLES FL 33146

1320 S. DIXIE HWY.
SUITE 830
CORAL GABLES FL 33146

3. Date Incorporated or Qualified

12/14/1990

4. FEI Number

65-0232451

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 2800 Ponce De Leon Blvd.

26 2800 Ponce De Leon Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 1125

27 Suite 1125

City & State

City & State

23 Coral Gables, Florida

28 Coral Gables, Florida

Zip

Country

Zip

Country

24 33134

25 USA

29 33134

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BREIER, ROBERT G.
1320 S. DIXIE HWY.
SUITE 830
CORAL GABLES FL 33146

81 Name

Robert G. Breier, Esq.

82 Street Address (P.O. Box Number is Not Acceptable)

2800 Ponce De Leon Boulevard

83

Suite 1125

84

Coral Gables

FL

85 Zip Code

33134

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3/20/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TP ☐ DELETE

NAME DINNERSTEIN, ELLIOT

STREET ADDRESS 1320 S. DIXIE HWY.

CITY-ST-ZIP CORAL GABLES FL

TITLE TST ☐ DELETE

NAME DINNERSTEIN, MARC

STREET ADDRESS 1320 S. DIXIE HWY.

CITY-ST-ZIP CORAL GABLES FL

TITLE T ☐ DELETE

NAME BREIER, ROBERT G.

STREET ADDRESS 1320 S. DIXIE HWY.

CITY-ST-ZIP CORAL GABLES FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/98

445-0707

CR2E037 (10/97)