

**2002 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # N44097**

1. Entity Name

**KIWANIS CLUB OF KEY BISCAYNE, INC.****FILED**  
**Feb 11, 2002 8:00 am**  
**Secretary of State**

02-11-2002 90224 013 \*\*\*\*61.25

Principal Place of Business

Mailing Address

**240 CRANDON BLVD. #104  
KEY BISCAYNE FL 33149  
US****240 CRANDON BLVD. #104  
KEY BISCAYNE FL 33149  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

**65-0336509**

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

**SUAREZ, ALBERTO  
240 CRANDON BLVD., STE. 104  
KEY BISCAYNE FL 33149**

Name

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

City

**FL**

Zip Code

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

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	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
D	IDALIA, LASTRIA	2498 SW 3RD AVE	MIAMI FL 33129	<input checked="" type="checkbox"/>
D	HAN, GREGORY	685 CURTISWOOD DR	KEY BISCAYNE FL 33145	<input checked="" type="checkbox"/>
D	MARTI, SERGIO	77 CRANDON BLVD #5C	KEY BISCAYNE FL	<input type="checkbox"/>
D	PEREZ, MAYRA	8121 SW 35 TERR	MIAMI FL	<input type="checkbox"/>
D	MCHELHANEY, CATHY	85 W ENID DRIVE	KEY BISCAYNE FL 33149	<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
President	Julian Perez	8121 S.W. 35 Terr.	Miami, FL 33155	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V -President	Ismail Delgado	1550 Madruga Avenue	Coral Gables, FL 33146	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
Secretary	Cathy McElhaney	85 W. Enid Drive	Key Biscayne, FL 33149	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Treasurer	Robert Oldakowski	605 Ocean Drive #8M	Key Biscayne, FL 33149	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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:

Cathy McElhaney Cathy McElhaney

1/24/02

(305) 365-8911

CR2E037 (9/01)