

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

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90274 032 ****70.00

DOCUMENT # N93000002528

1. Entity Name
CEDARS AUXILIARY, INC.



Principal Place of Business Mailing Address
1400 NW 12TH AVE 1400 NW 12TH AVE
MIAMI FL 33136 MIAMI FL 33136

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **65-0415064** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

BRATSPIS, SELMA R
1020 MERIDIAN AVE # 509
MIAMI FL 33139

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Selma R. Bratspis* DATE **2/10/03**
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
VP	CUNIO, ADELE	1020 MERIDIAN AVENUE #902	MIAMI BEACH FL 33139	<input type="checkbox"/>	<input type="checkbox"/>
PD	BRATSPIS, SELMA R	1020 MERIDIAN AVE # 509	MIAMI FL 33139	<input type="checkbox"/>	<input type="checkbox"/>
VPD	MANN, CHARLOTTE	3701 N COUNTRY CLUB DRIVE	AVENTURA FL 33680	<input type="checkbox"/>	<input type="checkbox"/>
DS	VAN HORNE, DEEDEE	15512 SW 142 CT	MIAMI SPRINGS FL 33166	<input type="checkbox"/>	<input type="checkbox"/>
TD	MAZER, SELMA	1200 WEST AVE # 1208	MIAMI BEACH FL 33139	<input type="checkbox"/>	<input type="checkbox"/>
VP	ZAPOLSKY, CLAIRE	1608 DREXOL AVE #14	MIAMI BEACH FL 33139	<input type="checkbox"/>	<input 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: *Selma R. Bratspis* DATE: **2/10/03** (305) 325-5083
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E037 (10/02)