

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001934

FILED
Apr 07, 2006
Secretary of State

Entity Name: THE BONSAI SOCIETY OF MIAMI, INC.

Current Principal Place of Business:

C/O FAIRCHILD TROPICAL GARDENS
10901 OLD CUTLER ROAD
CORAL GABLES, FL 33156

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 330665
MIAMI, FL 33233 US

New Mailing Address:

FEI Number: 65-0491818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HULNICK, ROBERT E
899 EAST 10TH AVENUE
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HILTON, GLEN
Address: 26175 SW 123 COURT
City-St-Zip: HOMESTEAD, FL 33032

Title: VD () Delete
Name: DIAZ, TOBY
Address: 13072 SW 49 CT
City-St-Zip: MIRAMAR, FL 33027

Title: VD () Delete
Name: KARCHER, DAVID
Address: 5374 SW 80 ST
City-St-Zip: MIAMI, FL 33143

Title: STD () Delete
Name: HULNICK, ROBERT E
Address: 899 EAST 10TH AVENUE
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: HULNICK, ROBERT E
Address: 899 EAST 10TH AVENUE
City-St-Zip: HIALEAH, FL 33010

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT HULNICK

TD

04/07/2006

Electronic Signature of Signing Officer or Director

Date