## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000004477

Entity Name: MIAMI CITY CLUB, INC.

FILED Juņ 16, 2<u>00</u>9 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

200 S. BISCAYNE BLVD. 200 S. BISCAYNE BLVD. 55TH FLOOR 55TH FLOOR MIAMI, FL 331312397 US MIAMI, FL 33131

**Current Mailing Address:** New Mailing Address:

200 S. BISCAYNE BLVD. 200 S. BISCAYNE BLVD. 55TH FLOOR 55TH FLOOR MIAMI, FL 331312397 US MIAMI, FL 33131 US

FEI Number: 65-0523515 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAVANA CLUB ENTERPRISES, LLC MIAMI CORPORATE SYSTEMS, LLC 200 S. BISCAYNE BLVD. 283 CATALONIA AVENUE 55TH FLOOR 2ND FLOOR MIAMI, FL 33131 US CORAL GABLES, FL 33134 US

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: SALOMON ESQUENAZI, MANAGER 06/16/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

CRABTREE, BONNIE Name: SHACK, RUTH Name: 200 S. BISCAYNE BLVD, 46TH FLOOR Address: 200 S. BISCAYNE BLVD, 5TH FLOOR Address:

MIAMI, FL 33131 MIAMI, FL 33131 US

City-St-Zip: City-St-Zip:

Title: PC Title: D/VP (X) Change ( ) Addition () Delete Name: PRUNKA, TIM Name: ACHKAR, NABIL

Address: 200 S BISCAYNE BLVD Address: 200 S. BISCAYNE BLVD. 19TH FLOOR

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131 US

Title: DV () Delete Title: D/S (X) Change ( ) Addition

KEABLE, TIM Name: KEABLE, TIM Name: 200 S BISCAYNE BLVD 3RD FL 200 S BISCAYNE BLVD 3RD FL Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify 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: TIM KEABLE S 06/16/2009