

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

FILED
Jul 18, 2003 8:00 am
Secretary of State

07-18-2003 90076 021 ****61.25

DOCUMENT # **N94000005133**

1. Entity Name
**BANKRUPTCY LEGAL ASSISTANTS' ASSOCIATION FOR THE
SOUTHERN DISTRICT OF FLORIDA, INC.**



Principal Place of Business Mailing Address
**% SUSAN SLOAN
316 NE 4TH STREET
FORT LAUDERDALE FL 33301
US**

2. Principal Place of Business 3. Mailing Address
9130 S. Dadeland Blvd.

Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 1225

City & State City & State
Miami, Florida

Zip Country Zip Country
33156 Dade



CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0624508** 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

**SLOAN, SUSAN
316 NE 4TH STREET
FORT LAUDERDALE FL 33301**

Name
~~Patricia Ryan~~
Street Address (P.O. Box Number is Not Acceptable)
9130 S. Dadeland Blvd., Suite 1225
City **Miami** FL Zip Code **33156**

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 *Patricia Ryan* **Patricia Ryan, Treasurer/Director July 15, 2003**
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 **\$5.00** May Be
Trust Fund Contribution. 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 | TD SLOAN, SUSAN 316 N.E. FOURTH ST. FORT LAUDERDALE FL 33301 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD LAMB, CINDI 316 N.E. FOURTH ST. FORT LAUDERDALE FL 33301 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SANTELICES, FRANCIS 25 SE 2ND AVE #919 MIAMI FL 33131 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD THOMPSON, CARMEN L 5900 S.W. 198TH TERRACE SOUTHWEST RANCHES FL 33332 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HERNANDEZ, AL 201 S. BISCAYNE BLVD, #1700 MIAMI FL 33131 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HARDY, LAURA 6830 S.W. 49 STREET MIAMI FL 33155 | <input checked="" type="checkbox"/> Delete |

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Treasurer/Director Patricia Ryan 9130 S. Dadeland Blvd., Suite 1225 Miami, FL 33156 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | President/Director Richard Allen 1221 Marcano Blvd. Plantation, FL 33322 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Secretary/Director Adelita Cabello 515 East Las Olas Blvd., Suite 1500 Fort Lauderdale, FL 33301 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Vice President/Director Joy Tunon 9130 S. Dadeland Blvd., Suite 1225 Miami, FL 33156 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |

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 *Patricia Ryan* **Patricia Ryan, Treasurer/Director July 15, 2003**
(305) 470-5000

CR2E037 (10/02)

~~Attachment~~
90144477
N94000005133

Bankruptcy Legal Assistants' Association for the Southern District of Florida, Inc.

Additional Officers:

Yohami Lam Guerra - Director
201 S. Biscayne Blvd.
Suite 2600
Miami, FL 33131

Jaime Paul - Director
401 E. Las Olas Blvd.
Suite 1500
Ft. Lauderdale, FL 33301
