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

DOCUMENT # N9400005475

110.

NAME

STREET ADDRESS

CITY-ST-7IP

THE CEJAS FAMILY FOUNDATION, INC.



FILED May 02, 2003 8:00 am Secretary of State

05-02-2003 90723 012 ****61.25

			100	WE 3				
Principal Plac	e of Business	Mailing Address						
		P.O. BOX 191768 MIAMI BCH FL 33139 US						
2. Principal Place of Business 3. Ma 420 Lincoln Road		3. Mailing Address	Mailing Address					
Suite, Apt. #, etc. S Suite 443		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & State C		City & State	City & State		4. FEI Number 65-0534149		oplied For	
Miami Beach, FL Zip Country Zi 33139 Dade		Zip	Country -	5. Certificate of St	5. Certificate of Status Desired		ditional	
	6. Name and Address of Current	Registered Agent		7. Name and Add	7. Name and Address of New Registered Agent			
			Name	PLC Investments				
	ESTMENTS INC.		Street Address		(P.O. Box Number is Not Acceptable)			
420 LINCOLN RD			420 Lincoln Road					
PENTHOL				Suite 443				
MIAMI BC	CH FL 33139		City	Durce 445	FL	Zip Cod	ie	
<u> </u>		· · · · · · · · · · · · · · · · · · ·		<u>Miami Beach</u>		3313		
	named entity submits this statement fo tions of registered agent.	r the purpose of changing its r	registered office o	or registered agent, or both, in	the State of Florida. I am fi	amiliar with,	and accept	
SIGNATURE .	· · · · · · · · · · · · · · · · · · ·							
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signa	iture required when reinstating)	DATE			
;· 	FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution.		Make Check Payable to Florida Department of State			
1	OFFICEOS AND DIS	557500	1	ADDITIONS (SUALIS)	O TO OFFICERS AND DIE	COTODON	1.40	
10.	OFFICERS AND DIF		11.		S TO OFFICERS AND DIF			
TITLE NAME	CEJAS, PABLO L	★ Delete	TITLE NAME	Director Helene: Christia	anne Ceias	☐ Change	X Addition	
•	420 LINCOLN RD PENTHOUSE		STREET ADDRESS	420 Lincoln Roa	-			
CITY-ST-ZIP	MIAMI BEACH FL 33139		CITY-ST-ZIP	Miami Beach, Fl				
TITLE	SD %	☐ Delete	TITLE			Change	Addition	
NAME	MONTERO, HILDA C		NAME			- •		
STREET ADDRESS	420 LINCOLN RD PENTHOUSE		STREET ADDRESS	420 Lincoln Ra	ad. Suite 443			
CITY-ST-ZIP	MIAMI BCH FL-33139		CITY - ST-ZIP	Miami Beach, F	•	<u>~</u>		
	חם					Tet Ob	- Line	

STREET ADDRE CITY-ST-ZIP TITLE ■ Delete LX Change ___ Addition CEJAS, PAUL L NAME NAME 420 Lincoln Road, Suite 443 STREET ADDRESS **420 LINCOLN RD PENTHOUSE** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Miami Beach, FL +33139 MIAMI BCH FL 33139 DVPT Change TITLE TITLE ☐ Delete Addition NAME CEJAS, GERTIE NAME **420 LINCOLN RD PENTHOUSE** STREET ADDRESS STREET ADDRESS 420 Lincoln Road, Suite 443 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33139** Miami Beach, FL 33139 Director -- ПΠЕ ☐ Delete TITLE ☐ Change X Addition NAME Nina Pellegrini NAME STREET ADDRESS STREET ADDRESS 420 Lincoln Road, Suite 443 CITY-ST-ZIP CITY-ST-ZIP Miami Beach, FL 33139 ☐ Delete ☐ Change X Addition TITLE TITLE Director

420 Lincoln Road, Suite 443 Miami Beach, FL 33139 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

Tiffany Markofsky

305-531-5220