## **FILED** 2002 UNIFORM BUSINESS REPORT (UBR) May 02, 2002 8:00 am Secretary of State DOCUMENT # **N94000005555** 1. Entity Name 05-02-2002 90088 012 \*\*\*\*70.00 THE CORAL WAY COLOMBIAN LIONS CLUB, INC. Principal Place of Business Mailing Address 14431 CEDAR CT 8241 SW 32 TERR MIAMI LAKES FL 33014 MIAMI FL 33155 Principal Place of Business \$10 5W 92 5T 3. Mailing Address W570 SAHE ite, Apt. # Letc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0732738 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent man in the second of Street Address (P.O. Box Number is Not Acceptable) **OLARTE, LUIS** 16455 SW 236 STREET HOMESTEAD FL 33031 City Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 **\$5.00** May Be Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ALVIN TITLE AARON ☐ Delete ☐ Addition NAME MEDINA, HERNANDO NAME 11510 SW 92 ST STREET ADDRESS 14431 CEDAR CT STREET ADDRESS MIAHI" CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES FL 33014 TITLE ☐ Delete TITLE ☐ Change ☐ Addition IVIS OLARTE NAME TORRES, HERNANDO NAME STREET ADDRESS 9575 SW 140 COURT 16455 5W STREET ADDRESS 236 5 CITY-ST-ZIP **MIAMI FL 33186** CITY-ST-7IP 3*03*1 TITLE ☐ Delete ☐ Addition ☐ Change ELENA BEDOYA FARKAS, YAZMIN - - - -NAME > € +.º NAME STREET ADDRESS 8241 SW 32 TERR STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33155** CITY-ST-ZIP ۷P TITLE ☐ Delete TITLE ☐ Change ☐ Addition AARON, ALVIN (AZHI`N NAME NAME 8241 STREET ADDRESS 11510 SW 92 STREET STREET ADDRESS 32 TER CITY-ST-7IP **MIAMI FL 33176** CITY-ST-ZIP 3315S TITLE Delete TITLE ☐ Change ☐ Addition aaron, ofelia NAME NAME STREET ADDRESS 11510 SW 92 STREET STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33176 TITLE ☐ Delete TITLE □ Change ☐ 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

RIVERS, YOLANDA

9885 NW 52 TERR

MIAMI FL 33178

JUNE PLAZMON Farlos 4502 305-2336642