

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003816

FILED
Apr 21, 2004
Secretary of State**Entity Name:** THE KOBER-LEICHNER MEMORIAL FOUNDATION INC.**Current Principal Place of Business:**777 BRICKELL AVENUE
SUITE 500
MIAMI, FL 33131**New Principal Place of Business:****Current Mailing Address:**777 BRICKELL AVENUE
SUITE 500
MIAMI, FL 33131**New Mailing Address:****FEI Number:** 65-0605686 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NACCARATO, MARY T
3500 SEGOVIA STREET
CORAL GABLES, FL 33134 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:** DP () Delete
Name: KOBER, MARC
Address: 777 BRICKELL AVENUE, #500
City-St-Zip: MIAMI, FL 33131**Title:** DVTS () Delete
Name: KOBER, HONEY
Address: 777 BRICKELL AVENUE, #500
City-St-Zip: MIAMI, FL 33131**Title:** D () Delete
Name: GREENBERG, YESHAYA
Address: 2038 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33140**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HONEY L. KOBER

VICE

04/21/2004

Electronic Signature of Signing Officer or Director

Date