2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# N96000000452

Entity Name: OPSAIL MIAMI 2000, INC.

Current Principal Place of Business:

9961 E BROADVIEW DR
BAY HARBOR ISLANDS, FL 33154 US

New Principal Place of Business:

Current Mailing Address:

9961 E BROADVIEW DR
BAY HARBOR ISLANDS, FL 33154 US

New Mailing Address:

FEI Number: 65-0659188 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SLOTNICK, HOWARD
9961 E. BROADVIEW DRIVE
BAY HARBOR ISLANDS, FL 33154 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: D ( ) Delete
Name: MAGUIRE, AMELIA R
Address: 1200 BRICKELL AVE.
City-St-Zip: MIAMI, FL 33101

Title: C ( ) Delete
Name: SLOTMICK, HOWARD
Address: 9961 E BROADVIEW DR
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: D ( ) Delete
Name: CRISTOL, A.J.
Address: 51 SW 1ST AVE.
City-St-Zip: MIAMI, FL 33130

Title: VPD ( ) Delete
Name: MCDONALD, JAMES L
Address: 1020 PORT BLVD.
City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change ( ) Addition
Name: SLOTNICK, HOWARD
Address: 9961 E BROADVIEW DR
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

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 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: JAMES L MCDONALD VPD 02/04/2009

Electronic Signature of Signing Officer or Director — Date