

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004255

FILED
Feb 25, 2009
Secretary of State

Entity Name: BUSINESS IMPROVEMENT DISTRICT OF CORAL GABLES, INC.

Current Principal Place of Business:

220 MIRACLE MILE, STE. 234
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

220 MIRACLE MILE, STE. 234
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0782529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLINA, MARI
220 MIRACLE MILE, STE. 234
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: P () Delete
Name: ROSENBLATT, BRAD
Address: 2700 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: V () Delete
Name: O'ROURKE, JOHN
Address: 75 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

Title: T () Delete
Name: FONTE, GUS
Address: 311 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: HERSH, BURTON
Address: 300 ARAGON AVE, STE. 330
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: MOLINA, MARI
Address: 220 MIRACLE MILE, STE. 234
City-St-Zip: CORAL GABLES, FL 33134

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:

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: MARI MOLINA

D

02/25/2009

Electronic Signature of Signing Officer or Director

Date