

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004255

FILED
Mar 30, 2010
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
Name: ROSENBLATT, BRAD
Address: 2700 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

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

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

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

Title: D
Name: ELDRED, WAYNE
Address: 65 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

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

I hereby 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 all other like empowered.

SIGNATURE: MARI MOLINA

D

03/30/2010

Electronic Signature of Signing Officer or Director

Date