2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000006228

City-St-Zip:

Entity Name: JUNIOR COTILLION OF GREATER MIAMI, INC.

FILED Apr 24, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 211 BALCROSS DR BAL HARBOUR, FL 33154 US **Current Mailing Address: New Mailing Address:** 211 BALCROSS DR BAL HARBOUR, FL 33154 US FEI Number: 65-0757432 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WHALEN, ELIZABETH CELLINI, DINA 4261 PALM LANE 211 BAL CROSS DRIVE MIAMI, FL FL US BAL HARBOUR, FL 33154 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: DINA CELLINI 04/24/2002 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CELLINI, DINA Name: Name: Address: 211 BAL CROSS DR Address: City-St-Zip: BAL HARBOUR, FL 33154 City-St-Zip: Title: Title: (X) Change () Addition () Delete GOLDBERG, UNDA JONTIFF, JEANNIE M Name: Name: Address: 4430 SABAL PALM RD Address: 540 N.E. 53 STREET City-St-Zip: MIAMI, FL 33137 City-St-Zip: MIAMI, FL 33137 Title: () Delete Title: () Change () Addition MOODY, PATRICIA Name: Name: 2204 N. BAY RD Address: Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: BERENS, MARILYN 5589 PINE TREE DRIVE Address: Address:

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.

City-St-Zip:

MIAMI, FL 33140

SIGNATURE: JEANNIE M. JONTIFF D 04/24/2002