2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N98000004747

Entity Name: THE PAUL ABRAMS ENDOWMENT PROJECT, INC.

Current Principal Place of Business:

2533 NORTHEAST 183RD STREET
NORTH MIAMI BEACH, FL 33180

New Principal Place of Business:

2533 NORTHEAST 183RD STREET
NORTH MIAMI BEACH, FL 33160

Current Mailing Address:

2533 NORTHEAST 183RD STREET
NORTH MIAMI BEACH, FL 33180

New Mailing Address:

2533 NORTHEAST 183RD STREET
NORTH MIAMI BEACH, FL 33160

FEI Number: 65-0857633 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BALOG, ANDREW E
C/O GREENBERG TRAURIG, P.A.
1221 BRICKELL AVENUE
MIAMI, FL 33131 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: NETHERTON, WILLIS A
Address: 2533 N.E. 183 STREET
City-St-Zip: N. MIAMI BEACH, FL 33160 20

Title: D ( ) Delete
Name: DE LA GRANA, STACEY
Address: 840 WREN AVENUE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: PD ( ) Delete
Name: KOFSKY, GALE
Address: 2587 N.E. 182 TERRACE
City-St-Zip: N. MIAMI BEACH, FL 33160

Title: D ( ) Delete
Name: HECHAVARRIA, MORTIMER
Address: 7891 W FLAGLER ST #168
City-St-Zip: MIAMI, FL 33141

Title: D ( ) Delete
Name: AZCUY, RAY
Address: 11500 GRIFFING BLVD
City-St-Zip: BISCAYNE PARK, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CARICO, DARCI
Address: 2350 SW 18TH TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33150 18

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: GALE KOFSKY PD 04/30/2009

Electronic Signature of Signing Officer or Director — Date