2002 UNIFORM BUSINESS REPORT (UBR)

Mar 05, 2002 8:00 am Secretary of State DOCUMENT # **N99000003576** 1. Entity Name 03-05-2002 90071 008 ****61.25 THE DORAL ACADEMY, INC. Principal Place of Business Mailing Address 2173 NW 99TH AVE 6255 BIRD RD MIAMI-DADE FL 33155 MIAMI FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0944569 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) ZULUETA, IGNACIO G **6255 BIRD RD** MIAMI-DADE FL 33155 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 П Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. (9/01) TITLE ☐ Change **✓** Addition ☐ Delete TITLE ZULUETA, FERNANDO J NAME NAME ۶ ځ STREET ADDRESS 6255 BIRD RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI-DADE FL 33155 ☐ Change Addition ☐ Delete TITLE TITLE LLANES, ROLANDO NAME NAME STREET ADDRESS STREET ADDRESS 4055 NW 97TH AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33178 ☐ Change ☐ Delete Addition TITLE TITLE MILIAN, LETICIA NAME NAME STREET ADDRESS 6255 BIRD RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI-DADE FL 33155 TITLE ☐ Addition TITLE ☐ Delete Ignacio G. Zulueta ZULUETA, IGNACIO NAME NAME 6255 Bird Road STREET ADDRESS 6255 BIRD ROAD STREET ADDRESS Miami, FL 33155 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33155 Secretary / Vice President ☐ Addition TITLE ☐ Delete TITLE NAME FRESEN, MAGDALENE Fresen, magdalena 6255 BIRD RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33155 Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

SIGNATURE: M. Freser 2/19/02 (

changed, or on an attachment with an address, with all other like empowered.

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if

ATTACHMENT DOCH! N99000003576

OFFICERS AND DIRECTORS (CONT'D)

TITLE: NAME: DIRECTOR

ALEJANDRA SALIMA ABELLO, M.S. ED.

STREET ADDRESS: CITY-STATE-ZIP:

5786 SW 97TH STREET MIAMI, FLORIDA 33156

TITLE:

DIRECTOR

NAME:

GABRIELLE ALVAREZ 10450 SW 48TH STREET

STREET ADDRESS: CITY-STATE-ZIP:

MIAMI, FLORIDA 33178

TITLE:

DIRECTOR

NAME:

VICTOR BARROSO 12583 SW 119TH PLACE

STREET ADDRESS: CITY-STATE-ZIP:

MIAMI, FLORIDA 33186

TITLE:

DIRECTOR

NAME:

ANA MARIA CARBONELL 193 CORYDON DRIVE

STREET ADDRESS: CITY-STATE-ZIP:

MIAMI, FLORIDA 33166

TITLE:

DIRECTOR

NAME:

MILLIE C. FRESEN 1412 EL RADO STREET

STREET ADDRESS: CITY-STATE-ZIP:

CORAL GABLES, FLORIDA 33134

TITLE:

DIRECTOR

NAME:

JOSE R. PEREZ

STREET ADDRESS: CITY-STATE-ZIP:

9701 SW 60TH COURT MIAMI, FLORIDA 33156