

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 91134 004 ***150.00

0196117

DOCUMENT # P98000004104

1. Entity Name

KEY BISCAYNE CULTURAL EDUCATION CENTER, INC.

Principal Place of Business

901 GRANDON BLVD.
KEY BISCAYNE FL 33149

Mailing Address

901 GRANDON BLVD.
KEY BISCAYNE FL 33149

2. Principal Place of Business

275 SW 13th St

3. Mailing Address

275 SW 13th St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33130

Country

USA

Zip

33130

Country

USA

4. FEI Number

65-0807569

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PADOVAN, MARIA
100 OCEAN LANE DR. #307
KEY BISCAYNE FL 33149

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

RAYMOND ZANGARI

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PSD
NAME PADOVAN, MARIA
STREET ADDRESS 100 OCEAN LANE DR. #307
CITY-ST-ZIP KEY BISCAYNE FL 33149 ☐ Delete

TITLE VTD
NAME ZANGARI, RAYMOND
STREET ADDRESS 100 OCEAN LANE DR. #307
CITY-ST-ZIP KEY BISCAYNE FL 33149 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 999 Brickell Bay Dr. # 2005
CITY-ST-ZIP Miami, FL. 33131

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 999 Brickell Bay Dr. # 2005
CITY-ST-ZIP Miami, FL. 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RAYMOND ZANGARI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/01 (305) 856-5979

CR2E034 (10/00)