# NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Mar 31, 2002 8:00 am**
**Secretary of State**
02-17-2002 90107 036 ****61.25

DOCUMENT # 721925

1. Entity Name
OAKLAND HILLS SOCIAL CENTER, INC.

- 19338

**DO NOT WRITE IN THIS SPACE**

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 800 SW 51 ST AVE. | 800 SW 51 ST AVE. |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: MARGATE, FL | City & State: MARGATE, FL |
| Zip: 33068 Country: | Zip: 33068 Country: |

DO NOT WRITE IN THIS SPACE

4. FEI Number 23-7279004 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name: EDWARD BERNSTEIN

Street Address (P.O. Box Number is Not Acceptable): 800 SW 51 ST AVE

City: MARGATE FL Zip Code: 33068

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: Edward M. Bernstein 1 Feb 2002
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FEE IS $61.25**
**Initial or Amended UBR**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

| | | | |
|---|---|---|---|
| TITLE | PRES. | TITLE | |
| NAME | STEPHEN MOSES "D" | NAME | |
| STREET ADDRESS | 751 SW 54TH AVE. | STREET ADDRESS | |
| CITY-ST-ZIP | MARGATE, FL 33068 | CITY-ST-ZIP | |
| TITLE | V. PRES. | TITLE | |
| NAME | WALLACE LEWIS "D" | NAME | |
| STREET ADDRESS | 930 SW 51 ST AVE. | STREET ADDRESS | |
| CITY-ST-ZIP | MARGATE, FL 33068 | CITY-ST-ZIP | |
| TITLE | 2ND V. PRES. | TITLE | |
| NAME | JAMES AMBROSE "D" | NAME | |
| STREET ADDRESS | 761 SW 54TH AVE. | STREET ADDRESS | |
| CITY-ST-ZIP | MARGATE, FL 33068 | CITY-ST-ZIP | |
| TITLE | REC. SECTRY | TITLE | |
| NAME | IRIS MONTERO | NAME | |
| STREET ADDRESS | 5038 SW 10TH CT | STREET ADDRESS | |
| CITY-ST-ZIP | MARGATE, FL 33068 | CITY-ST-ZIP | |
| TITLE | CORR. SECTRY | TITLE | |
| NAME | THERESA FAIRWEATHER | NAME | |
| STREET ADDRESS | 4455 SW 9TH ST. | STREET ADDRESS | |
| CITY-ST-ZIP | MARGATE, FL 33068 | CITY-ST-ZIP | |
| TITLE | TREAS. | TITLE | |
| NAME | EDWARD BERNSTEIN "D" | NAME | |
| STREET ADDRESS | 870 SW 49TH WAY | STREET ADDRESS | |
| CITY-ST-ZIP | MARGATE, FL 33068 | CITY-ST-ZIP | |

**DO NOT WRITE IN THIS SPACE**

CR2E037B (12/01)

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

**SIGNATURE:** S.E. Moses STEPHEN E. MOSES 2/1/02 954-973-0440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #