2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90137 028 ****70.00

000403

DOCUMENT # 722295

1. Entity Name
COMMUNITY HABILITATION CENTER, INC.

Principal Place of Business
11450 S.W. 79TH ST.
MIAMI FL 33173

Mailing Address
11450 S.W. 79TH ST.
MIAMI FL 33173

00045373

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 23-7171039 | Applied For | Not Applicable

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

6. Name and Address of Current Registered Agent

MAZZARELLA, JOHN
1900 BISCAYNE BLVD
MIAMI FL 33132

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	STANIEWICZ, JOSEPH	8845 SW 99 ST	MIAMI FL 33189	☒
D	TRACY, EDITH	14121 SW 74 TERR	MIAMI FL 33183	☐
S	MEEKS, GLORIA	7301 SW 35TH STREET	MIAMI FL 33155	☐
T	VAZQUEZ, ROSARIO	13956 SW 151 LANE	MIAMI FL 33186	☐
T	FURBER, WAYNE	11825 SW 107TH AVE	MIAMI FL 33176	☐
				☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	Paschal, Carl	20223 SW 103 AVE.	Miami, FL 33189	☒	☐
				☐	☐
				☐	☐
D				☒	☐
D				☒	☐
T	Brodeur, Brian	5685 SW 85 ST	Miami FL 33143	☐	☒

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

SIGNATURE: GLORIA C MEEKS Gloria Meeks 1/10/03 305-264-8054

CR2E037 (10/02)