

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Sep 04, 2001 08:00 AM
Secretary of State

DOCUMENT # N00000002296

1. Entity Name
 MISSIONARY OF MIAMI, INC.

Principal Place of Business		Mailing Address	
15151 N.W. 18TH AVENUE		15151 N.W. 18TH AVENUE	
MIAMI	FL	MIAMI	FL
33054		33054	

2. Principal Place of Business		3. Mailing Address	
2439 CENTERGATE DRIVE		2439 CENTERGATE DRIVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
#206		#206	
City & State		City & State	
MIRAMAR	FL	MIRAMAR	FL
Zip	Country	Zip	Country
33025		33025	

4. FEI Number	Applied For
65-1003634	Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
ELLIS TONYA L				Name			
15151 N.W. 18TH AVENUE				ELLIS TONYA L			
MIAMI FL				Street Address (P.O. Box Number is Not Acceptable)			
33054 US				2439 CENTERGATE DRIVE			
				City			
				MIRAMAR FL			
				Zip Code			
				33025			

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 _____ DATE **09/04/2001**

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. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	D	<input type="checkbox"/> Delete		TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CASH TINA L			NAME	HARRIS GAIL F		
STREET ADDRESS	3020 N.W. 172ND TERRACE			STREET ADDRESS	2439 CENTERGATE DRIVE, #206		
CITY-ST-ZIP	MIAMI FL 33056			CITY-ST-ZIP	MIRAMAR FL 33025		
TITLE	VSD	<input type="checkbox"/> Delete		TITLE	VSD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ELLIS TONY L			NAME	CASH TINA L		
STREET ADDRESS	15151 N.W. 18TH AVENUE			STREET ADDRESS	2439 CENTERGATE DRIVE, #206		
CITY-ST-ZIP	MIAMI FL 33054			CITY-ST-ZIP	MIRAMAR FL 33025		
TITLE	PTD	<input type="checkbox"/> Delete		TITLE	PTD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ELLIS WILLIE F			NAME	ELLIS TONYA L		
STREET ADDRESS	15151 N.W. 18TH AVENUE			STREET ADDRESS	2439 CENTERGATE DRIVE, #206		
CITY-ST-ZIP	MIAMI FL 33054			CITY-ST-ZIP	MIRAMAR FL 33025		
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: TONYA L. ELLIS PTD 09/04/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-time Phone #

CR2E037 (11/00)