

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N00000005189

1. Entity Name
UNITED YOUTH IN ACTION, INC.



Principal Place of Business
**10701 SW 216TH STREET
#15
MIAMI, FL 33170**

Mailing Address
**12552 SW 259TH ST.
NARANJA, FL 33023**

FILED

04 OCT -4 AM 11:47

SECRETARY OF STATE



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04012004 Chg-NP CR2E037 (10/03)

4. FEI Number
65-1036809

Applied For
Not Applicable

6. Certificate of Status Desired **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MATHEWS, EMILY
12552 SW 259TH ST.
NARANJA, FL 33023**

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

Filing Fee is \$61.25
Due by May 1, 2004

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Delete
NAME MATHEWS, EMILY
STREET ADDRESS 12552 SW 259TH ST.
CITY-ST-ZIP NARANJA, FL 33023

TITLE Change Addition
NAME **400041569864**
STREET ADDRESS 10/04/04--01034--010
CITY-ST-ZIP **\$61.25

TITLE DV Delete
NAME HORTON, DENNIS
STREET ADDRESS 10701 SW 216TH STREET #13
CITY-ST-ZIP MIAMI, FL 33170

TITLE Change Addition
NAME **400041569864**
STREET ADDRESS 10/04/04--01034--011
CITY-ST-ZIP **\$8.75

TITLE SD Delete
NAME DIAZ, CAROL
STREET ADDRESS 11925 SW 188 TERRACE
CITY-ST-ZIP MIAMI, FL 33177

TITLE Change Addition
NAME Villard Mercedes
STREET ADDRESS 21478 SW 89th Avenue
CITY-ST-ZIP MIAMI, FL 33189

TITLE TD Delete
NAME MCELVEEN, JOHN
STREET ADDRESS 13800 JACKSON ST
CITY-ST-ZIP MIAMI, FL 33176

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
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)(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: *Emily Mathews* Emily Mathews

9-30-04 9:30 Am

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #