

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N28268

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: INTERNATIONAL OUTREACH CENTER, INC.

Current Principal Place of Business:

12811 SW 134TH COURT
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

12811 SW 134TH COURT
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 65-0091894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VEGA, DAVID
10470 SW 109TH ST
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VEGA, DAVID
Address: 10470 SW 109TH ST
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: CRESPO, DEMETRIUS
Address: 3300 PEMBROKE RD BOX 50
City-St-Zip: HOLLYWOOD, FL 33021

Title: T () Delete
Name: FRALEY, EVELYN
Address: 4425 SW 116TH AVE
City-St-Zip: MIAMI, FL 33165

Title: D () Delete
Name: PICO, MARIO
Address: 10465 SW 109TH ST
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SALMI, LETICIA
Address: 10034 SW 127 CT.
City-St-Zip: MIAMI, FL 33186

Title: D (X) Change () Addition
Name: LEE, STEPHEN
Address: 16285 NW 64 AVE APT#348
City-St-Zip: MIAMI LAKES, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID VEGA

PD

04/30/2002

Electronic Signature of Signing Officer or Director

Date