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

## Jan 13, 2003 8:00 am Secretary of State **DOCUMENT # N50230** 1. Entity Name 01-13-2003 90053 024 \*\*\*\*61.25 DISTRICT FOUR, INC. Principal Place of Business Mailing Address 6401 SW 87 AVE 6401 SW 87 AVE STE 204 STE 204 MIAMI FL 33173 MIAM! FL 33173 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 65-0349921 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CARNEY, JERRY Street Address (P.O. Box Number is Not Acceptable) 6401 S.W. 87 AVE., SUITE 204 **MIAMI FL 33173** City Zio 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) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 VD TITLE Delete TITLE 801 Brickell Ave. #9 🔀 Change Addition TAMARA, CHEFFMAN NAME NAME 4600 ROYAL PALM CT STREET ADDRESS STREET ADDRESS Migmi, fl. 3313 1 CITY-ST-ZIP MIAMI FL 33140 CITY-ST-ZIP Deberah Valledor Michange [ 100 Almeria Ava #239 Ceral Gables, fl. 33134 D TITLE Delete TITLE Addition JERRY, GREBILL NAME NAME 825 ARTHUR GODFREY ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33140 CITY-ST-ZIP D TITLE Delete Norma Rosenkrintz & Change KRANTZLER, MARY NAME NAME 245 Alcazar Avr. Coral Gables, Fl. STREET ADDRESS 12695 S DIXIE HWY STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33156** CITY-ST-ZIP TITLE Delete TITI F LEVINE. MAUREEN NAME NAME 700 S ROYAL POINCIANA BLVD # 800 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33166 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME

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.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FMaureen Levine 1/9/03 305 418-7050

FILED