2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 16, 2000 8:00 am
Secretary of State
02-16-2000 90045 034 ****61.25

DOCUMENT # N95000004032

1. Entity Name

RETARDED ADULTS IN NEED BRIGHTEN OUR WORLD, INC.

Principal Place of Business	Mailing Address
C/O CAPRIO 10260 PORT OF SPAIN STREET COOPER CITY FL 33026	C/O CAPRIO 10260 PORT OF SPAIN STREET COOPER CITY FL 33026-4501

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7160 STIRLING RD	7160 STIRLING RD
Suite, Apt. #, etc.: DAVIE PLAZA	Suite, Apt. #, etc.: DAVIE PLAZA
City & State: DAVIE, FL	City & State: DAVIE FL
Zip: 33024 Country: BROWARD	Zip: 33024 Country: BROWARD

4. FEI Number: 65-0615686 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MINDE, JEFFREY 4300 N UNIVERSITY DRIVE SUITE B-104 LAUDERHILL FL 33351	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.

SIGNATURE: TERESA L CAPRIO / PRESIDENT — DATE: 2-7-00

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

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CAPRIO, TERESA L 10260 PORT OF SPAIN ST COOPER CITY FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEWEIS, FREDRICK T DR 555 SW 148TH AVE #127 SUNRISE FL 33325	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VANDENBOOMEN, BELINDA 555 SW 148TH AVE #127 SUNRISE FL 33325	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CAPRIO, KATHERINE 1425 SW 8 CT FT LAUDERDALE FL 33312	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KAUFMAN, JEFFREY 2215 SW 27 TERR COCONUT GROVE FL 33133	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAPRIO, SAMANTHA 10260 PORT OF SPAIN ST COOPER CITY FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

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: TERESA L CAPRIO — 2-7-00 — 954-436-1900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #