

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 10, 2001 8:00 am**  
**Secretary of State**

05-04-2001 90166 011 \*\*\*150.00  
 07-10-2001 90139 001 \*\*\*\*61.25  
 07-10-2001 90139 002 \*\*\*\*\*8.75

9548



DO NOT WRITE IN THIS SPACE

**DOCUMENT # N97000002777**  
 1. Entity Name  
**JAMES CORREA FOUNDATION, INC.**

Principal Place of Business      Mailing Address  
**4264 SW 13TH TERRACE**      **4264 SW 13TH TERRACE**  
**MIAMI FL 33134**      **MIAMI FL 33134**

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

4. FEI Number **65-0748309**      Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**  
**CORREA, MARY**  
**4264 SW 13TH TERRACE**  
**MIAMI FL 33134**

**7. Name and Address of New Registered Agent**  
 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 *Mary de Correa*      DATE **07/05/01**  
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**  
**After September 12, 2001, min. will be \$236.25**

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**

TITLE	PD	<input type="checkbox"/> Delete
NAME	<del>CORREA, MARY</del>	
STREET ADDRESS	<del>4264 SW 13TH TERRACE</del>	
CITY-ST-ZIP	<del>MIAMI FL 33134</del>	
TITLE	VD	<input type="checkbox"/> Delete
NAME	CABRERA, CESAR M	
STREET ADDRESS	4251 SW 138TH COURT	
CITY-ST-ZIP	MIAMI FL 33175	
TITLE	TD	<input type="checkbox"/> Delete
NAME	(CORREA) LEONOR A Cabrer	
STREET ADDRESS	4264 SW 13TH TERRACE	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE		<input type="checkbox"/> Delete
NAME	Correa Bolivar	
STREET ADDRESS	4264 SW 13 Terr.	
CITY-ST-ZIP	Miami FL 33134	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Mary de Correa* **REQUIRED**

07/05/01 (305)638-3337

CR2E037 (5/01)

Look for blue background on the front of this check, and the imageSafe® logo on back. If not present, do not cash.

**JAMES CORREA FOUNDATION, INC.**

PH. 305-445-2233  
4264 S. W. 13TH TERRACE  
MIAMI, FL 33134

C0060390

1021

DATE: 04/12/01

63-4/630 FL  
1102

Attachment  
Doc #  
19700002.TT7

PAY TO THE ORDER OF

Department of State

one hundred fifty 00/100

\$ 150.00

DOLLARS



**NationsBank**

NationsBank, N.A.

ACH R/T 063000047

FOR: Cyprus 2001

Mary de Correa

⑆001021⑆ ⑆063000047⑆ ⑆001596571484⑆ ⑆0000015000⑆

Please you has Ck # 1021 for \$ 150.00  
to pay.

Thank You.

James Correa,

7-5-01