

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2000 8:00 am
Secretary of State

03-31-2000 90094 029 ****70.00

DOCUMENT # N98000003022

1. Entity Name

NISEI GOJO RYU KARATE & JUJITSU SOUTHERN REGION

Principal Place of Business

Mailing Address

**18061 N.W. 27TH AVENUE
 MIAMI FL 33056**

**18061 N.W. 27TH AVENUE
 MIAMI FL 33056-3506**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0540348

☒ Applied For

☐ Not Applicable

Zip

Country

Zip

Country

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

**THOMPSON, HERBIE
 18061 N.W. 27TH AVENUE
 MIAMI FL 33056**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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 PD ☐ Delete
 NAME THOMPSON, HERBIE
 STREET ADDRESS 7110 N.W. 179TH STREET, #311
 CITY-ST-ZIP MIAMI FL 33015

TITLE ☐ Change ☒ Addition
 NAME **D Garner, Jerry**
 STREET ADDRESS **2855 NW 163 Street**
 CITY-ST-ZIP **MIAMI FL 33054**

TITLE VD ☐ Delete
 NAME SISCO, JAMES
 STREET ADDRESS 9601 NORWOOD DRIVE, #D
 CITY-ST-ZIP TAMPA FL 33624

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME WINN, ULYSSES "POP"
 STREET ADDRESS 1031 W 2ND STREET
 CITY-ST-ZIP RIVERIA BEACH FL 33404

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME LINER, TERRANCE
 STREET ADDRESS 1211 SESAME ST
 CITY-ST-ZIP OPA LOCKA FL 33054

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME NEWBOLD, RUBEN
 STREET ADDRESS 19422 NW 79TH AVE
 CITY-ST-ZIP MIAMI FL 33015

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME FLETCHER, DEXTER
 STREET ADDRESS 6700 NW 186TH ST
 CITY-ST-ZIP MIAMI FL

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:

HERBIE THOMPSON - HERBIE THOMPSON 3-29-00 (305) 6285588
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)