2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 02, 2002 8:00 am
Secretary of State
06-02-2002 90909 038 ****73.75

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1. Entity Name

NISEI GOJU RYU KARATE & JUJITSU SOUTHERN REGION YOUTH P.A.C. PROGRAM, INC.

Principal Place of Business	Mailing Address
18061 N.W. 27TH AVENUE MIAMI FL 33056	18061 N.W. 27TH AVENUE MIAMI FL 33056

DO NOT WRITE IN THIS SPACE

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 65-0540348 ☐ 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
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD THOMPSON, HERBIE 7110 N.W. 179TH STREET, #311 MIAMI FL 33015	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Thompson, Herbie - 17115 NW 17 Av Miami FL 33056	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SISCO, JAMES 9601 NORWOOD DRIVE, #D TAMPA FL 33624	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WINN, ULYSSES "POP" 1031 W 2ND STREET RIVERIA BEACH FL 33404	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LINER, TERRANCE 1211 SESAME ST OPA LOCKA FL 33054	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DSAMUEL LINER 1211 SESAME ST OPA-Locka Fla 33054	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NEWBOLD, RUBEN 19422 NW 79TH AVE MIAMI FL 33015	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DAnnie Washington 17115 NW 17 Av Miami FL 33056	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FLETCHER, DEXTER 6700 NW 186TH ST MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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 5/1/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date