

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 748238

1. Entity Name

MIAMI RIGHT TO LIFE, INC.

**FILED**  
**May 04, 2000 8:00 am**  
**Secretary of State**

05-04-2000 90139 043 \*\*\*\*61.25

Principal Place of Business

2451 BRICKELL AVE  
APT 6J  
MIAMI FL 33129  
US

Mailing Address

601 BRICKELL KEY DR  
STE 805  
MIAMI FL 33131-2649  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2001289

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

ALLEN & GALEGO  
601 BRICKELL KEY DR  
STE 805  
MIAMI FL 33131

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 SD ☐ Delete  
NAME AUGENSTEIN, MARTHA J.  
STREET ADDRESS 2463 SW 13 ST  
CITY-ST-ZIP MIAMI FL

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

TITLE D ☐ Delete  
NAME TALAMAS, JULIA  
STREET ADDRESS 545 ZAMORA AVE.  
CITY-ST-ZIP CORAL GABLES FL

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

TITLE D ☐ Delete  
NAME WALSH, LARRY  
STREET ADDRESS 1191 NW 8TH ST. RD.  
CITY-ST-ZIP MIAMI FL 33138

TITLE ☒ Change ☐ Addition  
NAME LARRY WALSH  
STREET ADDRESS 8405 NW 8th Street, Apt 307  
CITY-ST-ZIP Miami, FL 33124

TITLE PTD ☐ Delete  
NAME ALLEN, MARTHA A  
STREET ADDRESS 2451 BRICKELL AVENUE, APT 6J  
CITY-ST-ZIP MIAMI FL 33129

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

TITLE VD ☐ Delete  
NAME DUNDORF, JIM  
STREET ADDRESS 6151 SW 80TH STREET  
CITY-ST-ZIP MIAMI FL 33143

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Martha Allen*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Feb 4, 2000*

Date

*305 379 6208*

Daytime Phone #

CR2E037 (9/99)