2001 UNIFORM BUSINESS REPORT (UBR)

Apr 13, 2001 8:00 am Secretary of State ФОСИМЕНТ # **N00000008036** HAITIAN NEIGHBORHOOD RESOURCE CENTER/POTO MITAN, 04-13-2001 90051 009 ****61.25 Principal Place of Business Mailing Address C/O WHITE & CASE LLP C/O WHITE & CASE LLP 200 SOUTH BISCAYNE BLVD. 200 SOUTH BISCAYNE BLVD. UUUJJJ43 MIAMI FL 33131 MIAMI FL 33131 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-1080680 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GRAGG, K. LAWRENCE Street Address (P.O. Box Number is Not Acceptable) C/O WHITE & CASE LLP 200 SOUTH BISCAYNE BLVD., SUITE 4900 MIAMI FL 33131 Zip Code City 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition TITLE 🔀 Delete TITLE NAME NAME AFANADOR, ISABEL STREET ADDRESS STREET ADDRESS 3300 N.W. 27TH AVE., #1116 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33142 ☐ Change ☐ Addition TITI F Delete NAME NAME ALLEN, NANCY STREET ADDRESS STREET ADDRESS 7600 RED ROAD, SUITE #211A CITY-ST-7IF CITY-ST-ZIP MIAMI FL 33143 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME BASTIEN, MARLEINE STREET ADDRESS STREET ADDRESS 8340 N.E. 2ND AVE. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33138** Change ☐ Addition ☐ Delete TITLE TITLE BAZIN, FRITZ NAME NAME STREET ADDRESS STREET ADDRESS 7644 N. MIAMI AVE. CITY-ST-ZIP CITY-ST-ZIP MIAMI L3 3138 Change ☐ Addition Delete TITLE TITLE n NAME NAME BERNI, JOAN STREET ADDRESS STREET ADDRESS 3510 BISCAYNE BLVD. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33138 Change ☐ Addition Delete TITLE TITLE NAME NAME BLECKE, BERTA STREET ADDRESS STREET ADDRESS 1265 N.W. 12TH AVE. CITY-ST-ZIP CITY-ST-ZIP MIAMI 33 136 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 trastee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Lawrence Gragg, Secretary (305) 371-2700 Manua 17 SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR Date

Daytime Phone #

an address, with all other like empowered.

changed, or on an attachment with

SIGNATURE:

Members of the Board and Officers

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Stephen P. Clark Government Center

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Attachment Doc. # N00000008036 D0035943

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