2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 02, 2001 8:00 am
Secretary of State
06-02-2001 90008 001 ****61.25

DOCUMENT # N96000006026

1. Entity Name
THE URBAN ENVIRONMENT LEAGUE OF GREATER MIAMI, INC.

Principal Place of Business / Mailing Address
P.O. BOX 558404
MIAMI, FL 33255-8404

C0070800

2. Principal Place of Business	3. Mailing Address
SAME AS ABOVE	SAME AS ABOVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65 0780105 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BUSH, GREG
6261 CORAL LAKE DRIVE
MIAMI, FL 33155

7. Name and Address of New Registered Agent
Name: N/A
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: TREASURER NAME: BETANCOURT, NINA GAIL STREET ADDRESS: P.O. BOX 4479 CITY-ST-ZIP: MIAMI, FL 33092	☒ Delete	TITLE: TREASURER NAME: ALVAREZ, CARMEN STREET ADDRESS: 6610 SW 43RD STREET CITY-ST-ZIP: MIAMI, FL 33155	☐ Change ☒ Addition
TITLE: PRESIDENT ELECT NAME: MESA, BLANCA STREET ADDRESS: 544 FERNWOOD ROAD CITY-ST-ZIP: KEY BISCAYNE, FL 33149	☒ Delete	TITLE: Vice President NAME: MARICARMEN MARTINEZ STREET ADDRESS: 4212 LAGUNA ST., UPSTAIRS CITY-ST-ZIP: CORAL GABLES, FL 33146	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E037 (11/00)

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: [signature], President 6/29/01 3056674398
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #