NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Mar 31, 2002 8:00 am Secretary of State

DOCUMENT # N9600006026 (6) 1. Entity Name					3 ccretary of State 33-31-2002 90359 040 ****61.25		
1. Entity Nar	URBAN ENVIRONI	MENT LIFAG	UF OF	03-	31-2002 90359 040 **	***61.25	
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GKE	ATER MIAMI, INC.	7	•				
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	DO MOT MOITE	National		***	· O ~ T.U (**	
	DO NOT WRITE I	N THIS SPA	ACE				
2. Principal F	Place of Business # STD F = 7 3.	Mailing Address					
2121	VE 24 STREET	SAME					
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.	• .	D	O NOT WRITE IN THIS SPAC	Œ	
City & Stat	to	City 8 State		4 FFI Mussband	· · · · · · · · · · · · · · · · · · ·	Applied For	
City & State City		City & State	y & State		4. FEI Number Applied For Not Applicable		
		Zip	Country		_ \$2	75 Additional	
Zip. 33	137 MIAMI-DADE	-	,	5. Certificate of State		Required	
				7. Name and Address	s of Current Registered Ag	ent	
			Name Bush, GREG				
	DO NOT WRI		Street Addre	Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) RIVE			
	the state of the s		626	CORAL LA	KE DRIVE		
	IN THIS SPACE						
			City \M\	Am I	FL	70 Code 55	
						33155	
8. The above	named entity submits this statement for the	purpose of changing its reg	istered office or regi	stered agent, or both, in the	e state of Florida.		
1		•	•				
SIGNATURE	<u>,</u>				•		
CICITATIONE.	<u> </u>						
SIGIVITORE :	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Re	gistered Agent signature req	uired when reinstating)	DATE		
	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Re	gistered Agent signature req	uired when reinstating}	DATE		
	FEE IS \$61.25	9. Election Campa	ign Financing	\$5.00 May Be	Make Check Pa		
			ign Financing				
	FEE IS \$61.25 Initial or Amended UBR	9. Election Campa Trust Fund Cont	ign Financing	\$5.00 May Be	Make Check Pa		
10.	FEE IS \$61.25 Initial or Amended UBR OFFICERS AND DIRECTOR	9. Election Campa Trust Fund Cont	ign Financing ribution.	\$5.00 May Be	Make Check Pa		
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

yng wall

3/6/02

305 576-2553