

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90164 034 ****61.25

DOCUMENT # 737458

1. Entity Name

MIAMI RESCUE MISSION, INC.

Principal Place of Business

Mailing Address

2159 NW 1ST COURT
P.O. BOX NO. 420620
MIAMI FL 33242-0620
US

2159 NW 1ST COURT
P.O. BOX NO. 420620
MIAMI FL 33242-0620
US

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

59-1743865

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

TEW, JEFFREY ALLEN
201 S. BISCAYNE BLVD.
SUITE 2600
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 PD ☐ Delete
NAME JACOBS, FRANKLIN M.
STREET ADDRESS 2159 NW 1ST COURT
CITY-ST-ZIP MIAMI FL 33127

TITLE ☐ Change ☒ Addition
NAME D HOYE, CHARLES
STREET ADDRESS 10321 JUPITER CT
CITY-ST-ZIP PEBBLES PINES, FL 33026

TITLE VTD ☐ Delete
NAME JACOBS, MAXINE E.
STREET ADDRESS 2159 NW 1ST COURT
CITY-ST-ZIP MIAMI FL 33127

TITLE ☐ Change ☒ Addition
NAME D PEREZ, LEO
STREET ADDRESS 13305 SW 37 TERR
CITY-ST-ZIP MIAMI, FL 33175

TITLE SD ☐ Delete
NAME TEW, JEFFREY ALLEN
STREET ADDRESS 201 S BISCAYNE BLVD STE 2600
CITY-ST-ZIP MIAMI FL 33131

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS → 2600
CITY-ST-ZIP

TITLE D ☐ Delete
NAME GORDON, ROGER
STREET ADDRESS 14020 N MIAMI AVE
CITY-ST-ZIP MIAMI FL 33168

TITLE VP ☐ Change ☒ Addition
NAME BOSS, JA
STREET ADDRESS 1801 NW 108 AVE
CITY-ST-ZIP PEBBLES PINES, FL 33026

TITLE D ☐ Delete
NAME LYONS, WILLIAM
STREET ADDRESS 825 WRIGHT ST
CITY-ST-ZIP INGLEWOOD FL 34223

TITLE EVP ☐ Change ☒ Addition
NAME JAMES BENDER
STREET ADDRESS 11460 SW 102 ST
CITY-ST-ZIP MIAMI, FL 33176

TITLE D ☐ Delete
NAME MCCRAY, DARYL
STREET ADDRESS 13800 SW 149 CIRCLE LANE #3
CITY-ST-ZIP MIAMI FL 33186-8256

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/02 365571-2204

CR2E037 (9/01)