

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000000033

1. Entity Name

MIAMI POLICE ATHLETIC LEAGUE, INC.

Principal Place of Business

MIAMI POLICE DEPT
#208
MIAMI FL 33128

Mailing Address

400 N.W. 2ND AVENUE
MIAMI FL 33128

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

NOT APPLICABLE

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

JOHNSON, AUBREY
400 NW 2 AVE
OFFICE OF THE CHIEF
MIAMI FL 33128

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

Vice President Aubrey Johnson *[Signature]* 4/25/02

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
NAME MARTINEZ, RAUL ☐ Delete
STREET ADDRESS 400 NW 2 AVENUE
CITY-ST-ZIP MIAMI FL 33128

TITLE 2VD
NAME CACERES, STEVEN ☐ Change ☒ Addition
STREET ADDRESS 400 NW 2ND AVE.
CITY-ST-ZIP MIAMI, FL. 33128

TITLE VD
NAME JOHNSON, AUBREY J ☐ Delete
STREET ADDRESS 400 NW 2ND AVENUE
CITY-ST-ZIP MIAMI FL 33128

TITLE T
NAME GARCIA, JOSE ☐ Change ☒ Addition
STREET ADDRESS 400 NW 2ND AVE.
CITY-ST-ZIP MIAMI, FL. 33128

TITLE 2VD
NAME UPTGROW, MELVIN E ☒ Delete
STREET ADDRESS 400 NW 2 AVENUE
CITY-ST-ZIP MIAMI FL 33128

TITLE SD
NAME Mirabile, Hector ☐ Change ☒ Addition
STREET ADDRESS 400 NW 2ND AVE
CITY-ST-ZIP MIAMI, FL. 33128

TITLE SD
NAME ROBERTS, LYNDIA ☒ Delete
STREET ADDRESS 400 NW 2ND AVENUE
CITY-ST-ZIP MIAMI FL 33128

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

TITLE T
NAME VERE, ANDREW ☒ Delete
STREET ADDRESS 400 N.W. 2ND AVENUE
CITY-ST-ZIP MIAMI FL 33128

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

TITLE T
NAME RIMONDI, JOSEPH ☒ Delete
STREET ADDRESS 400 N.W. 2ND AVENUE
CITY-ST-ZIP MIAMI FL 33128

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

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:

Aubrey Johnson *[Signature]* 4/25/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)