UNIFORM BUSINESS REPORT (U

AMENDED

DOCUMENT # N96000006026

FILED

02 OCT 31 PM 1:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

Urban Environment League of Greater Miami

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
UrbanEnvironLeague Office Suite, Apt. #, etc. 212 NE 24th St	212 N.E. 24th St Suite, Apt. #, etc.
City & State Miami, FL 33137	City & State Miami FL
Zip: 33137 Country: USA	Zip: 33137 Country: USA

4. FEI Number ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Gregory Bush

Street Address (P.O. Box Number is Not Acceptable): 212 NE 24th St

City: MIAMI FL Zip Code: 33137

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 _____ 10/17/02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

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

TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP	Co-President Nancy Liebman 16 Island Av MIAMI, Florida 33139	D
TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP	Vice President Maricarmen Martinez 32 NE 39th St MIAMI, Florida 33137	D
TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP	Co-President Andres Rivero 201 S. Biscayne Blvd #1450 MIAMI, Florida 33131	D
TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP	Treasurer Carmen Ferreiro 20515 SW 117 Ct MIAMI, Florida 33177	D
TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP	Secretary Albert HARUM-Alvarez 7998 SW 58 Terr MIAMI, FLORIDA 33156	D
TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP		

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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

jr 11/6/02