

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90122 038 ****61.25

DOCUMENT # 737458

1. Entity Name
MIAMI RESCUE MISSION, INC.



Principal Place of Business
**2159 NW 1ST COURT
P.O. BOX NO. 420620
MIAMI, FL 33242-0620 US**

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

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04012008

Chg-NP

CR2E037 (12/06)

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- ESQ
FOUR SEASONS TOWER, 15TH FLOOR
1441 BRICKEL AVENUE
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME JACOBS, FRANK
STREET ADDRESS 331 SW 8TH ST APT 1C
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE VD ☐ Delete
NAME JACOBS, MAXINE
STREET ADDRESS 331 SW 8TH ST APT 1C
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE SD ☐ Delete
NAME TEW, JEFFREY
STREET ADDRESS 1441 BRICKELL AVE, 15TH FLOOR
CITY-ST-ZIP MIAMI, FL 33131

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

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

TITLE D ☐ Delete
NAME MCCRAY, DARYL
STREET ADDRESS 13800 SW 149 CIRCLE LANE #3
CITY-ST-ZIP MIAMI, FL 331868256

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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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 exemptions contained in Chapter 119, 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:

Conrad Summit *Ronnie Summit*

4/24/08

305 571 2246

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #