

2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N99000001192

Entity Name: EMPOWER "U", INC.

Current Principal Place of Business:

7900 N.W. 27TH AVE, SUITE E-12
MIAMI, FL 33147-4909

Current Mailing Address:

7900 N.W. 27TH AVE, SUITE E-12
MIAMI, FL 33147-4909 US

FEI Number: 65-0899207

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

EMPOWER U, INC
7900 NW 27TH AVE
STE E-12
MIAMI, FL 33147 US

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: YVONNE CHRISTINE STROY-MARTIN

03/06/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name WYATT, BELITA
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title PRESIDENT
Name STEWART-REVERE, YELENA DR.
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title DIRECTOR
Name MCCLENDON, VANDILLA
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title DIRECTOR
Name CLEMENTS, RICHARD
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title PRESIDENT ELECT
Name SPURLOCK, JAMAL
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title DIRECTOR
Name FLOYD, BRENDA
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title SECRETARY/TREASURER
Name MIMS, FRED
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title DIRECTOR
Name GILES, BRUCE
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: YVONNE CHRISTINE STROY-MARTIN

CFO

03/06/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DAVIS, LISA
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title DIRECTOR
Name DARREN, MADDEN
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title DIRECTOR
Name MARIN, RAQUEL
Address 7900 NW 27TH AVE
SUITE E-12
City-State-Zip: MIAMI FL 33147

Title DIRECTOR
Name JACKSON, CHARLES
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title CFO
Name STROY-MARTIN, YVONNE CHRISTINE
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title DIRECTOR
Name ANN, WHITE
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title DIRECTOR
Name ALEXANDER, BRACEY
Address 7900 NW 27TH AVE
SUITE E-12
City-State-Zip: MIAMI FL 33147

Title DIRECTOR
Name HILL, JAMES
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909

Title DIRECTOR
Name NIVAR, FREDDY
Address 7900 N.W. 27TH AVE, SUITE E-12
City-State-Zip: MIAMI FL 33147-4909