2001 UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # 708383** 04-30-2001 90035 023 ****61.25 UNITY ON THE BAY, INC. Principal Place of Business Mailing Address 411 NORTHEAST 21ST STREET 411 NORTHEAST 21ST STREET MIAM! FL 33137 MIAMI FL 33137 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-0816468 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name Street Address (P.O. Box Number is Not Acceptable) TRAPP, JAMES E 411 NE 21ST STREET **MIAMI FL 33137** 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) FILE NOW: 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11, TITLE Addition TITLE ☐ Delete VINCENT, JIM NAME NAME STREET ADDRESS 14931 NE 9TH AVE STREET ADDRESS CITY-ST-7IP MIAMI FL 33161 CITY-ST-ZIP STR TITLE ☐ Detete TITLE Change Change Addition VIVIAND, HELEN NAME NAME STREET ADDRESS STREET ADDRESS 8282 NE 2ND CT CITY-ST-ZIP CITY-ST-7(P MIAMI_FL 33138 TITLE Delete TITLE **Addition** PHIL SMITH KIPP, WILLIAM NAME NAME 1965 KENNDY CSWY. #29 STREET ADDRESS 780 NE 69TH ST #2007 STREET ADDRESS CITY-ST-ZIP NORTH BAY VILLAGE, FL 33141 **MIAMI FL 33138** CITY-ST-ZIP TITLE Delete TITLE Addition LEON PEPPER LYNCH, SUE NAME 453 ME 76 ST. MIAMI, FL 33137 STREET ADDRESS %marina, 720 NE 69TH ST STREET ADDRESS CITY-ST-ZIP MIAMI FL 33138 CITY-ST-7IF TITLE ☐ Delete TITLE Change ☐ Addition NAME MONTENEGRO, FABIAN NAME STREET ADDRESS 15940 SW 76TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33193** ☐ Delete TITLE ☐ Change Addition KLEIN, CHRISTINA NAME NAME STREET ADDRESS 331 NW 145TH ST STREET ADDRESS CITY-ST-ZIP NIMIAMI FL 33168 CITY-ST-ZIP

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:

Daytime Phone #

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