

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 734646

1. Entity Name

LEGION OF MARY OF MIAMI, INC.

Principal Place of Business

129 AMERICA AVENUE
CORAL GABLES FL 33134
US

Mailing Address

P.O. BOX 381752
MIAMI FL 33238-1752
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1994955

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

MARK W.
STEELE, MARGARET D.
19281 HOLIDAY RD
MIAMI FL 33157

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

MARK W. STEELE

Mark W. Steele

2/16/00

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 STEELE, MARGARET
STREET ADDRESS 19281 HOLIDAY RD.
CITY-ST-ZIP MIAMI FL 33157 ☒ Delete

TITLE PD
NAME STEELE, MARK W.
STREET ADDRESS 19281 HOLIDAY RD
CITY-ST-ZIP MIAMI, FL 33157 ☒ Change ☐ Addition

TITLE S
NAME DE MEILLAC, TERESA
STREET ADDRESS 2855 SW 39TH AVENUE
CITY-ST-ZIP MIAMI FL 33134 ☐ Delete

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

TITLE T
NAME AMISAL, ROGER
STREET ADDRESS 14585 SW 123RD AVENUE
CITY-ST-ZIP MIAMI FL 33186 ☐ Delete

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

TITLE D
NAME SOULIERE, RICHARD (REV.)
STREET ADDRESS 2700 NE 36TH ST
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064 ☐ Delete

TITLE
NAME
STREET ADDRESS P.O. BOX 221937
CITY-ST-ZIP HOLLYWOOD, FL 33022-1937 ☒ Change ☐ Addition

TITLE P
NAME IYANNA TOMINEC
STREET ADDRESS 440 N.W. 132 ST
CITY-ST-ZIP MIAMI, FL 33168 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE ASSISTANT SECRETARY
NAME MADGE CHIN
STREET ADDRESS 95 NE 128 ST
CITY-ST-ZIP MIAMI, FL 33161 ☐ 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:

Mark W. Steele

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/00

Date

305-233-0082

Daytime Phone #

CR2E037 (9/99)