

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 08, 2002 8:00 am
Secretary of State

09-08-2002 90126 013 ****61.25

DOCUMENT # 737277

1. Entity Name

MEDITATION UNLIMITED, INC.

DO NOT WRITE IN THIS SPACE

978538

2. Principal Place of Business

50 N.W. 198 ST.

3. Mailing Address

50 N.W. 198 ST.

Suite, Apt. #, etc.

MIAMI,

Suite, Apt. #, etc.

MIAMI,

City & State

MIAMI, FL.

City & State

MIAMI, FL.

Zip

33169

Country

USA

Zip

33169

Country

USA

4. FEI Number

59-1754182

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

DOTTIE RAPPAPORT

Street Address (P.O. Box Number is Not Acceptable)

12500 CLASSIC DRIVE

City

CORAL SPRINGS,

FL

Zip Code

33071

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)

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 PD
NAME DOROTHY TORLONE
STREET ADDRESS 50 N.W. 198 ST.
CITY - ST - ZIP MIAMI, FL 33169

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE DV
NAME WILLIAM HALL
STREET ADDRESS 5930 N. FAIRWAY STREET
CITY - ST - ZIP HOLLYWOOD, FL 33021

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE S/T D
NAME DOTTIE RAPPAPORT
STREET ADDRESS 12500 CLASSIC DRIVE
CITY - ST - ZIP CORAL SPRINGS, FL 33071

TITLE
NAME
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CITY - ST - ZIP

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IN THIS SPACE**

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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:

DOTTIE RAPPAPORT DOTTIE RAPPAPORT 9/5/02 (954) 255-9909

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #