2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # 741829 May 26, 2000 8:00 am 1. Entity Name Secretary of State MIAMI RUNNERS, INC. 05-26-2000 90122 003 ****61.25 Principal Place of Business Mailing Address 7920 S W 40 STREET 7920 S W 40 STREET MIAMI FL 33155-6743 MIAMI FL 33155 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 51-0226283 Not Applicable Zip Country **\$8:75** Additional -5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) NORWITCH, ELLIE 16232 S.W. 92 AVE. **MIAMI FL 33157** Zip Code City FL 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. TITI F Change X Addition Delete TITLE A3/1er, NAME NAME PEREZ, MARIA 151 WZ OPIB STREET ADDRESS STREET ADDRESS 6281 SW 16TH TERRACE Miamij P1. 33158 CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33155 ☐ Addition ☐ Delete ☐ Change TITLE TITLE P/D NAME NORWITCH, ELLIE STREET ADDRESS STREET ADDRESS 16232 S.W. 92 AVE. CITY-ST-ZIP~ CITY-ST-ZIP MIAMI FL Delete Change ■ Addition TITLE TITLE NAME NAME MAGRAM, GARY STREET ADDRESS STREET ADDRESS 10121 SW 141 STREET CITY-ST-ZIP CITY-ST-ZIP MIAM! FL 33176 ☐ Change Addition Delete TITLE TITLE NAME NAME MATUSZAK, DON STREET ADDRESS STREET ADDRESS 11905 SW 99TH COURT CITY-ST-ZIP CITY-ST-ZIP <u>Miami FL 33176</u> Change ☐ Addition Sturge-wells, Doris ☐ Delete TITL F TITLE NAME NAME SPORGE-WELLS, DORIS 9771 5-W. 48 st. STREET ADDRESS STREET ADDRESS 9771 S.W. 48 ST. Miani, F. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

Daytime Phone #