

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90064 032 ****61.25

DOCUMENT # 754175

1. Entity Name
ENCOUNTERS IN EXCELLENCE, INC.



Principal Place of Business

**23050 S.W. 156 AVE.
MIAMI FL 33170
US**

Mailing Address

**23050 S.W. 156 AVE.
MIAMI FL 33170
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KERN, RICHARD C.
23050 SW 156 AVE
MIAMI FL FL 33170**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME	D FIELDS, DOROTHY	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	5337 NW 29 CT	
CITY-ST-ZIP	MIAMI FL 33142	
TITLE NAME	D ADMIRE, RUTH	<input type="checkbox"/> Delete
STREET ADDRESS	6459 SUNSET DR	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE NAME	C WEINTRAUB, ALBERT	<input type="checkbox"/> Delete
STREET ADDRESS	3835 CAROLE CT	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE NAME	D KERN, RICHARD C	<input type="checkbox"/> Delete
STREET ADDRESS	23050 SW 156 AVE	
CITY-ST-ZIP	MIAMI FL 33170	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	D Admire, Jack	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	6459 Sunset Dr.	
CITY-ST-ZIP	Miami, FL 33143	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.

SIGNATURE:

Richard C. Kern **Richard C. Kern** 1/21/03 305-248-1416

CR2E037 (10/02)