

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90374 009 ****61.25

DOCUMENT # 759060

1. Entity Name

JOHN MISKOFF FOUNDATION, INC.

Principal Place of Business

9605 NW 79 AVE #16
 9605 NW 79TH AVE #16
 HIALEAH GARDENS FL 33016
 US

Mailing Address

9605 NW 79 AVE #15
 9605 NW 79TH AVE #16
 HIALEAH GARDENS FL 33016-2526
 US

2. Principal Place of Business

3. Mailing Address

Suite Apt. #, etc.

Suite Apt. #, etc.

Suite 3

Suite 295

City & State

City & State

Deerfield Beach, FL

Deerfield Beach, FL

Zip

Country

Zip

Country

33441

33442



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2193608

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

PALMER, GEORGE

9605 NW 79TH AVE #16

HIALEAH GARDENS FL 33016

Name

George Palmer

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

849-SE 8 Avenue Suite 3

City

Deerfield Beach

FL

Zip Code

33441

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

George Palmer

George Palmer

4-10-2002

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 PTD ☐ Delete
 NAME PALMER, GEORGE
 STREET ADDRESS 9605 N.W. 79 AVE., #18
 CITY-ST-ZIP MIAMI FL

TITLE PTD ☒ Change ☐ Addition
 NAME George Palmer
 STREET ADDRESS 849-SE 8 Avenue Suite 3
 CITY-ST-ZIP Deerfield Beach, FL 33441

TITLE D ☐ Delete
 NAME CAHAN, SYLVIA
 STREET ADDRESS 1701 ANDROS ISLE
 CITY-ST-ZIP COCONUT CREEK FL

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

TITLE D ☐ Delete
 NAME LAKER, JOYCE
 STREET ADDRESS 800 GENESSEE
 CITY-ST-ZIP TAMPA FL

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 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:

George Palmer

4-10-2002 954-425-4776