

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

DOCUMENT # N00000000899

1. Entity Name Triangle Community Development Corporation

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
310 NW 206th Terrace

Suite, Apt. #, etc.

3. Mailing Address
SAME

Suite, Apt. #, etc.

City & State
Miami, Florida

City & State

Zip
33169

Country
USA

Zip

Country

4. FEI Number 65-0987376

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Vincent Black

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

310 NW 206th Terrace

City Miami

FL

Zip Code 33169

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 date 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
NAME Vince Black
STREET ADDRESS
310 NW 206th Terrace
CITY - ST - ZIP
Miami, Florida 33169

TITLE
NAME S + D
Bobby Bradley
STREET ADDRESS
2070 Grant Avenue
CITY - ST - ZIP
Opa-Locka, Florida 33054

TITLE
NAME T + D
Clive Price
STREET ADDRESS
6033 NW 201st Terrace
CITY - ST - ZIP
Hialeah, Florida 33015

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CITY - ST - ZIP

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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: Vincent L. Black VINCENT L. BLACK, PRESIDENT 3056548281
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

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