

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N00000002239**

1. Entity Name

FRESH START DROP IN CENTER, INC.**FILED**
Jun 04, 2001 8:00 am
Secretary of State

06-04-2001 90015 045 ***150.00

00057306

DO NOT WRITE IN THIS SPACE

Principal Place of Business 18075 NW 27TH AVENUE MIAMI, FLORIDA 33056		Mailing Address 18075 NW 27TH AVENUE MIAMI, FLORIDA 33056	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0896924		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SANDRA McQUEEN 3613 LARGO DRIVE MIRIMAR, FLORIDA 33023		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.

SIGNATURE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD CAROLYN Y. WILSON 18075 NW 27TH AVENUE MIAMI, FLORIDA 33056 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD JAMES HAZEL 18075 NW 27TH AVENUE MIAMI, FLORIDA 33056 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAGALY SMITH 18075 NW 27TH AVENUE MIAMI, FLORIDA 33056 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SANDRA McCARTNEY 18075 NW 27TH AVENUE MIAMI, FLORIDA 33056 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SARAH ROUNDTREE 18075 NW 27TH AVENUE MIAMI, FLORIDA 33056 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that no 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carolyn Y. Wilson*

APRIL 16, 2001 (305) 623-9937