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

FILED May 13, 2002 8:00 am Secretary of State

OITH OKN BUSHIN	Secretary of State				
DOCUMENT # NOOO C	05-13-2002 90102 046 ****61.25				
UNITED DOMINICAL					
MALLET TOWNER	22 at 100 k	-(DA TAC.			
DO NOT WRITE	N THIS S	PACE			
50 1101 1111111	- 111100	I ACE	•		
2. Principal Place of Business 7th Ct	3. Mailing Address	4 04			
Suite, Apt. #, etc.	19602 Suite. Apt. #, etc.	NW 7th CI		DO NOT WRITE IN THIS SI	DACE
City & State	City & State	-		20 NOT WATE IN 11/13/31	
MIAMI FL	M.AM	R	4. FEI Number 65-10	06795	Applied For Not Applicable
Zip Country 1 33169	33169	Country	5. Certificate of Sta	us Desired 🖂 💲	8.75 Additional ee Required
الترايية المناشر المنطورين والمناشر المناسرة الم		Name	7. Name and Addres	s of Current Registered	
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	(R.O. Box Number is No	7.O. Box Nymber is Nat Acceptable)			
IN THIS SPACE			802		
The state of the s	maintain in the second	City	RAL CAT	SCES FL	Zip Code 3 / 3 /
8. The above named entity submits this statement for	r the purpose of changing it	s registered office or regist	ered agent, or both, in th	e state of Florida.	
SIGNATURE Daw	(mal) ·			Noal	_
Signature, typed or printed name of registered agent	and the if applicable. (NO	TE: Registered Agent signature requir	ed when reinstating)	DATE	
FEE IS \$61.25	9 Floring Co			, a primario e la constanta de	
Initial or Amended UBR	1.5	mpaign Financing Contribution.	\$5.00 May Be Added to Fees	Make Check Department	
10. OFFICERS AND DIE	ECTORS			- Approximate the second secon	
THE IAN CARRINGTON	, D	THILE			2
STREET ADDRESS 19602 NW 7+6	NAME STREET ADDRESS		•	1 (12/	
CITY-SI-ZIP MUMMI PZ 33,	169	CITY-ST-ZIP	in the state of th	marine iiii	0378
NAME LEDPOLD Egs	EPH	TITLE		٠	CR2E037B (12/01)
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NAME STREET ADDRESS CITY-ST-ZIP MEANNI TOSE T	STREET ADDRESS: CITY-ST-ZIP	DO NOT WRITE			
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CHY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with t indicated on this report or supplemental report is of the corporation or the receiver or trustee empc attachment with an address, with all tuber like own.	his filing does not qualify for rue and accurate and that n	the exemption stated in Seny signature shall have the	ection 119.07(3)(i). Florid same legal effect as if m	a Statutes, I further certify ade under oath; that I am	that the information
of the corporation or the receiver or trustee emporattachment with an address, with all other like emporations attachment with an address.	wered to execute this repor powered.	t as required by Chapter 6	17. Florida Statutes; and	I that my name appears in	Block 10 or on an
SIGNATURE: (,)	1 JA80	10208 h	of a	4/29/07	
SIGNATURE AND TAPPETOR PR	NTED NAME OF SIGNING OFFICER		Date	Daytim	ne Phone #