

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000004273

FILED  
Jun 16, 2003  
Secretary of State

**Entity Name:** COMMUNITY IMPERATIVES TRAINING, INC.

**Current Principal Place of Business:**

16120 SW 107 PLACE  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

16120 SW 107 PLACE  
MIAMI, FL 33157

**New Mailing Address:**

**FEI Number:** 26-5604122

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MICKEY, CARRIE B  
16120 SW 107 PLACE  
MIAMI, FL 33157

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SHAHBOZ, ZORA  
Address: 8310 SW 60 AVENUE  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: HAWKINS, LEE  
Address: 4650 SW 24 STREET  
City-St-Zip: HOLLYWOOD, FL 33023

Title: D ( ) Delete  
Name: CORLEY, CHARLES  
Address: 16322 SW 107 COURT  
City-St-Zip: MIAMI, FL 33157

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SHAHBOZ, ZORA  
Address: 2818 WHISPER BAY BLVD  
City-St-Zip: GULF BREEZE, FL 32563

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEANETTE SHAHBOZ

D.

06/16/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date