2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N0000006470

ALBANIAN AMERICAN CULTURAL COMMITTEE OF FLORIDA,



FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90986 020 ****61.25

Dal Place of Business Mailing Address TH STREET 113 14TH STREET IN BEACH FL 33786 BELLEAIR BEACH FL 33786						
3. Mailing Address						
pt. #, etc. Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES				
City & State		4. FEI Number 59-3685174			Applied For	
Zip	Country	5. Certificate of Stat	tus Desired	\$8.75 Ad	ditional	1
Registered Agent		7. Name and Addre	ess of New Registered	<u></u>	<u>.</u>	1
	Name Street Address	s (P.O. Box Number is No	ot Acceptable)		- 100	
	City		F	Zip Cod	e	1
				n familiar with,	and accept	
Trust Fund C	ontribution.	\$5.00 May Be Added to Fees	Florida Depa	rtment of S	State	
L.) Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition	F037 (10/02
☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	CBC
☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
☐ Delete	NAME STREET ADDRESS			☐ Change	☐ Addition	
	3. Mailing Address Suite, Apt. #, etc. City & State Zip t Registered Agent P. Election Cam Trust Fund C RECTORS Delete Delete Delete	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country Registered Agent Name Street Address City Or the purpose of changing its registered office or regist I and title if applicable. (NOTE: Registered Agent signature requir 9. Election Campaign Financing Trust Fund Contribution. RECTORS 11. Delete Title NAME STREET ADDRESS CITY-ST-ZIP Delete Title NAME STREET ADDRESS CITY-ST-ZIP Delete Title NAME STREET ADDRESS CITY-ST-ZIP Delete Title NAME STREET ADDRESS CITY-ST-ZIP Delete Title NAME STREET ADDRESS CITY-ST-ZIP Delete Title NAME STREET ADDRESS CITY-ST-ZIP Delete Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	3. Mailing Address Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc. CHECK HERE IF MAKIN City & State 4. FEI Number 59-3685174 Zip Country 5. Certificate of Status Desired Registered Agent 7. Name and Address of New Registered Street Address (P.O. Box Number is Not Acceptable) City F Or the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I an and stell # applicable. (NOTE Pegasered Agent agrusture required when reinstating) Date 9. Election Campaign Financing S5.00 May Be Added to Fees Make Chee Florida Depa RECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND E NAME SIREET ADDRESS CITY-ST-ZIP Delete TITLE NAME SIREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST	3. Mailing Address Suite, Apt. #, etc. Check Here if Making Changes City & State 4. FEI Number 59-3685174 A Fee Require Zip Country 5. Certificate of Status Desired \$8.75 A Fee Require Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Cod or the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and the I applicative. (NOTE Registered Agent signalure required when remotating) Date 7. Name and Address of New Registered Agent. Name Street Address (P.O. Box Number is Not Acceptable) The purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and the I applicative. (NOTE Registered Agent signalure required when remotating) Date 7. 9. Election Campaign Financing \$5.00 May Be Added to Fees Make Check Payable Florida Department of \$1. RECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN INTER MAKE SIRET ADDRESS CITY-S1-2P Change Change Delete TILE Change Change NAME SIRET ADDRESS CITY-S1-2P Change Delete TILE Change NAME Change Change Change Change Change Delete TILE Change NAME Change Change Change Change Change Delete TILE Change Delete TILE Change NAME Change Change Delete TILE Change Delete TILE Change Delete Change Delete Change Change Delete Change Change Delete Change Change Delete Change Dele	3. Mailing Address Suile, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State 4. FEI Number 59-3685174 Applied For Not Applicable Applied For Not Applied For Not Applicable Applied For Not

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.