

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

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91338 018 ****61.25

DOCUMENT # N00000007714



1. Entity Name
**URBAN CHILDREN LITERACY & INNOVATIVE CENTER FOR
KNOWLEDGE INC.**

Principal Place of Business

**10430 SW 165 STREET
MIAMI FL 33157**

Mailing Address

**10430 SW 165 STREET
MIAMI FL 33157**

11025033



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-1057238**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GASTON, HERVE
10430 SW 165 STREET
MIAMI FL 33157**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	CEO	<input type="checkbox"/> Delete
NAME	GASTON, HERVE	
STREET ADDRESS	10430 SW 165 STREET	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	BT	<input type="checkbox"/> Delete
NAME	ANDREW, MIKAEL	
STREET ADDRESS	309 NE 135 STREET	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE	BST	<input type="checkbox"/> Delete
NAME	HARMON, ZULLY	
STREET ADDRESS	13850 NW 65 AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	BT	<input type="checkbox"/> Delete
NAME	SATTORY, GEORGE	
STREET ADDRESS	7649 SW 75 STREET	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	BT	<input type="checkbox"/> Delete
NAME	LINTAN, JERRY	
STREET ADDRESS	18275 SW 125 AVE	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	BT	<input type="checkbox"/> Delete
NAME	SCHWABERG, JACK	
STREET ADDRESS	12451 NW 22 AVE	
CITY-ST-ZIP	MIAMI FL 33147	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 Section 10 of this report, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HERVE GASTON 04-25-2003

CR2E037 (10/02)