## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N00000007938

Entity Name: THE HEART OF THE CITY, INC.

May 01, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5525 NW 7TH AVE MIAMI, FL 33127

**Current Mailing Address: New Mailing Address:** 

1405 NW 203 ST MIAMI, FL 33169

FEI Number: 65-1062031 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MOBLEY, DWIGHT 1405 NW 203 ST MIAMI, FL 33169

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

DP (X) Change ( ) Addition () Delete MOBLEY, DWIGHT MOBLEY, DWIGHT K Name: Name: 1405 NW 203 RD STREET Address: 1405 NW 203 RD STREET Address:

City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI, FL 33169

Title: **DVPS** () Delete Title: (X) Change ( ) Addition SPENCE, CRYSTAL Name: MOBLEY, MELODY E Name:

Address: 14420 NW 16 AVE Address: 1405 NW 203 ST City-St-Zip: MIAMI, FL 33167 City-St-Zip: MIAMI, FL 33169

Title: () Delete Title: (X) Change ( ) Addition

HAYWOOD, SANDRA HAYWOOD, SANDRA D Name: Name: **644 NW 46 STREET** Address: Address: 2920 NW 51 TE City-St-Zip: MIAMI, FL 33127 City-St-Zip: MIAMI, FL 33142

Title: ( ) Delete Title: (X) Change ( ) Addition

WOODSIDE, SAMUEL B Name: HUMES, GLORIA J Name: 1780 NW 51 TER Address: Address: 9720 SW 16 ST

City-St-Zip: MIAMI, FL 33142 City-St-Zip: PEMBROKE PINES, FL 33025

Title: () Delete Title: (X) Change ( ) Addition MOBLEY, MELODY WOODSIDE, TABBETHA Name: Name:

1405 NW 203 ST 9720 SW 16 ST Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: PEMBROKE PINES, FL 33025

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: DWIGHT K. MOBLEY DP 05/01/2002