2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000008344

Apr 28, 2003 Secretary of State

Entity Name: GIRLS RISING ABOVE COMMON ELEMENTS, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 5937 NW 22 AVE MIAMI, FL 33142 **Current Mailing Address: New Mailing Address:** PO BOX 824461 PEMBROKE PINES, FL 33082 FEI Number: 65-1089121 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: CLARKE, VERONICA P CLARKE, VERONICA P 15887 NW 11 ST 6431 MAIN STREET PEMBROKE PINES, FL 33028 US MIAMI LAKES, FL 33014 US 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: 04/28/2003 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PLAYER, CATHERINE M Name: Name: Address: 11417 SW 148 TERRACE Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: (X) Change () Addition CLARKE, VERONICA P Name: Name: CLARKE, VERONICA P Address: 1588 7 NW 11 ST Address: 6431 MAIN STREET, #311 City-St-Zip: PEMBROKE PINES, FL 33028 City-St-Zip: MIAMI LAKES, FL 33014 Title: (X) Delete Title: () Change () Addition WILLIAMS, WILLIE Name: Name: 73 W. FLAGLER STREET SUITE 1902 Address: Address: City-St-Zip: MIAMI, FL 33130 City-St-Zip: Title: () Delete Title: () Change () Addition LONG, JACQUELYN Name: Name: 2361 LAKE MIRAMAR WAY Address: Address: City-St-Zip: MIRAMAR, FL 330253840 City-St-Zip: Title: Title: () Delete () Change () Addition LATSON, ANITA Name: Name: 2355 NW 80 STREET Address: Address: City-St-Zip: MIAMI, FL 33147 City-St-Zip: Title: () Delete Title: (X) Change () Addition HILL, MICHELLE HILL. MICHELLE Name: Name: Address: 1407 SAINT GABRIELLE LANE #3309 Address: 8285 NW 15 AVENUE WESTON, FL 33326 MIAMI, FL 33147 City-St-Zip: 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: VERONICA P. CLARKE P 04/28/2003