

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000001607

1. Entity Name

BET HESED, INC.

Principal Place of Business

3 SW 72 ST
MI FL 33173

Mailing Address

14101 SW 66 ST A2
MIAMI FL 33183

2. Principal Place of Business

10700 SW 56 St.

3. Mailing Address

14101 SW 66 St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami

City & State

Miami

Zip

33176

Country

Dade

Zip

33183

Country

Dade

4. FEI Number

65-1075179

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FISHER, RICHARD F
14101 SW 66 ST A2
MIAMI FL 33183

Name SAME

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.

SIGNATURE

Richard F. Fisher Richard F. Fisher

4/18/02

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 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME FISHER, RICHARD F
STREET ADDRESS 14101 SW 66 ST A2
CITY-ST-ZIP MIAMI FL 33183 ☐ Delete

TITLE Same
NAME Same
STREET ADDRESS Same
CITY-ST-ZIP Same ☐ Change ☐ Addition

TITLE D
NAME FISHER, KAREN L
STREET ADDRESS 14101 SW 66 ST A2
CITY-ST-ZIP MIAMI FL 33183 ☐ Delete

TITLE Same
NAME Same
STREET ADDRESS Same
CITY-ST-ZIP Same ☐ Change ☐ Addition

TITLE D
NAME CHEDDESINGH, DAPHNE
STREET ADDRESS 13735 SW 176 TER
CITY-ST-ZIP MIAMI FL 33177 ☒ Delete

TITLE Director
NAME Ajuwa Adewusi
STREET ADDRESS 14327 SW 97 Ter.
CITY-ST-ZIP Miami, FL 33186 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard F. Fisher Richard F. Fisher

4/18/02 (305)383-1440

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)