

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90038 036 ****61.25

DOCUMENT # N01000001711

1. Entity Name

ACTION FOR BRAZIL'S CHILDREN, INC.

Principal Place of Business

**350 S.E. 2ND STREET STE 500
 FT. LAUDERDALE FL 33301-1919**

Mailing Address

**350 S.E. 2ND STREET STE 500
 FT. LAUDERDALE FL 33301-1919**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1084310

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD STE 250
 PLANTATION FL 33323**

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.

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
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **GOMEZ-PARATCHA, JIMENA**
 CITY-ST-ZIP **OLD MILL HOUSE MILL LANE
 BERSHIRE SL4 -5SQ**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **GOMEZ-PARATCHA, SONIA**
 CITY-ST-ZIP **1404 S.E. SECOND COURT
 FT LAUDERDALE FL 33301**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **SILVER, DAVID C**
 CITY-ST-ZIP **350 S.E. 2ND STREET STE 500
 FT LAUDERDALE FL 33301-1919**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **SALLARULO, PAUL M**
 CITY-ST-ZIP **4507 N.E. 25TH AVE
 FT LAUDERDALE FL 33308**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **NAGER, BRUCE A**
 CITY-ST-ZIP **15 PELICAN AVE
 FT LAUDERDALE FL 33301**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **FERNANDEZ, DANIELA**
 CITY-ST-ZIP **16400 COLLINS AVE VILLA 4
 MIAMI FL 33160**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
 NAME **President - P**
 STREET ADDRESS **OLD MILL HOUSE MILL LANE**
 CITY-ST-ZIP **Windsor, Berkshire SL4 - 5SQ**

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

TITLE ☒ Change ☐ Addition
 NAME **T - Treasurer**
 STREET ADDRESS
 CITY-ST-ZIP

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

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

TITLE ☒ Change ☐ Addition
 NAME **S - Secretary**
 STREET ADDRESS **16400 Collins Ave Villa 4**
 CITY-ST-ZIP **North Miami FL 33160**

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: DAVID SILVER **2-28-02** **954-760-9000**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)