

2002 UNIFORM BUSINESS REPORT (UBR)

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FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: MISSING CHILDREN SEARCH FOUNDATION, INC.

Current Principal Place of Business:

6270 S. W. 62 COURT
SOUTH MIAMI, FL 33143 US

New Principal Place of Business:

6400 S.W. 63 AVENUE
SOUTH MIAMI, FL 33143 US

Current Mailing Address:

6270 S. W. 62 COURT
SOUTH MIAMI, FL 33143 US

New Mailing Address:

P. O. BOX 140031
CORAL GABLES, FL 33114 US

FEI Number: 65-1099056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESSES, ROXANA
6270 S. W. 62 COURT
SOUTH MIAMI, FL 33143 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LESSES, ROXANA
Address: 6270 S. W. 62 COURT
City-St-Zip: SOUTH MIAMI, FL 33143 US

Title: V () Delete
Name: LESSES, NICOLAS
Address: 6270 S. W. 62 COURT
City-St-Zip: SOUTH MIAMI, FL 33143 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LESSES, ROXANA
Address: 6270 S. W. 62 COURT
City-St-Zip: SOUTH MIAMI, FL 33143 US

Title: D (X) Change () Addition
Name: LESSES, NICOLAS
Address: 6270 S. W. 62 COURT
City-St-Zip: SOUTH MIAMI, FL 33143 US

Title: D () Change (X) Addition
Name: DELGADO, ANA
Address: 4271 N. W. 11 STREET #4
City-St-Zip: MIAMI, FL 33126 US

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: ROXANA LESSES

D

04/29/2002

Electronic Signature of Signing Officer or Director

Date