

# 2002 UNIFORM BUSINESS REPORT (UBR) *AMENDED*

DOCUMENT # N01000005326

1. Entity Name

THE MIAMI TOUCHDOWN CLUB, INC.

Principal Place of Business

Mailing Address

3785 NW 82ND AVE. SUITE 111  
MIAMI FL 33166

3785 NW 82ND AVE. SUITE 111  
MIAMI FL 33166

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2365377

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME DIAMOND, FRED ☒ Delete  
STREET ADDRESS 8175 NW 153 ST #309  
CITY-ST-ZIP MIAMI LAKES FL 33014

TITLE PD ☒ Change ☐ Addition  
NAME IRIZARRY, HERMAN  
STREET ADDRESS 10801 SW 142nd Ave.  
CITY-ST-ZIP Miami, FL 33186

TITLE VD ☒ Delete  
NAME IRIZARRY, HERMAN  
STREET ADDRESS 10801 SW 142 AVE  
CITY-ST-ZIP MIAMI FL 33186

TITLE VD ☒ Change ☐ Addition  
NAME MUNROE, JOSEPH  
STREET ADDRESS 9320 SW 102 CT  
CITY-ST-ZIP MIAMI, FL 33176

TITLE VD ☒ Delete  
NAME MUNROE, JOSEPH  
STREET ADDRESS 9320 SW 102 CT  
CITY-ST-ZIP MIAMI FL 33176

TITLE VP, EVANS, TOM ☒ Change ☐ Addition  
STREET ADDRESS 7270 MILLER DRIVE  
CITY-ST-ZIP MIAMI, FL. 33155

TITLE TD ☐ Delete  
NAME STEINBAUER, JOHN R  
STREET ADDRESS 9500 SW 73 AVE  
CITY-ST-ZIP MIAMI FL 33156

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

TITLE SD ☒ Delete  
NAME MCDERMOTT, CORNELIUS  
STREET ADDRESS 14210 ALAMANDA AVE  
CITY-ST-ZIP MIAMI LAKES FL 33014

TITLE SD ☒ Change ☐ Addition  
NAME COLLEDGE, ROBERT H.  
STREET ADDRESS 13601 SW 79th Ct.  
CITY-ST-ZIP MIAMI, FL. 33156

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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 another like empowered.

SIGNATURE:

*John R Steinbauer*  
PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02

(305) 477-1815

Date

Daytime Phone #

CR2E037 (9/01)