

FILED
Jun 10, 2003 8:00 am
Secretary of State

04-07-2003 90970 012 ****61.25

4/7/21

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N02000002135

1. Entity Name

PANAMANIAN YOUTH AND CHILDRENS ASSOCIATION, INC.



Principal Place of Business

14700 SOUTHWEST 116TH AVENUE
MIAMI FL 33176

Mailing Address

14700 SOUTHWEST 116TH AVENUE
MIAMI FL 33176

55047425

2. Principal Place of Business

3011 NW 203 Lane

3. Mailing Address

P.O. Box 55-1729

☒ CHECK HERE IF MAKING CHANGES

City & State

Miami, FL

City & State

Opalocka, FL 33055

4. FEI Number

043630168

Applied For

Not Applicable

Zip

33056

Country

USA

Zip

33055

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name: Jacqueline New Crossdale

Street Address (P.O. Box Number is Not Acceptable)

3011 NW 203 Lane

City: Miami

FL

Zip Code

33056

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

3-25-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
☐ Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: PD
NAME: DRAKES, GINA
STREET ADDRESS: 14700 SOUTHWEST 116TH AVENUE
CITY-ST-ZIP: MIAMI FL 33176 ☐ Delete

TITLE: SD
NAME: DRAKES, CARLA
STREET ADDRESS: 14700 SOUTHWEST 116TH AVENUE
CITY-ST-ZIP: MIAMI FL 33176 ☐ Delete

TITLE: TD
NAME: CROSSDALE, JACQUELINE
STREET ADDRESS: 14700 SOUTHWEST 116TH AVENUE
CITY-ST-ZIP: MIAMI FL 33176 ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☒ Change ☐ Addition
NAME: TREASURER
STREET ADDRESS: Gina Drakes
CITY-ST-ZIP: 14700 SW 116 Ave
Miami, FL 33176

TITLE: ☒ Change ☐ Addition
NAME: Vice-President
STREET ADDRESS: Carla Drakes
CITY-ST-ZIP: 14716 SW 116 Ave.
Miami, FL 33176

TITLE: ☒ Change ☐ Addition
NAME: President
STREET ADDRESS: Jacqueline Crossdale
CITY-ST-ZIP: 3011 NW 203
Miami, FL 33056

TITLE: ☐ Change ☒ Addition
NAME: Secretary
STREET ADDRESS: JANINA Jamieson-Bailey
CITY-ST-ZIP: 8400 S.W. 82 Avenue
MIAMI, FL 33025

TITLE: ☐ Change ☒ Addition
NAME: Public Relations
STREET ADDRESS: Jazmin Richards
CITY-ST-ZIP: 2762 NW 192 Terrace
Miami, FL 33056

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
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:

JACQUELINE NEW CROSSDALE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-25-03 (786) 331-4210

Date

Daytime Phone

CR2E037 (10/02)