FILED

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

## DOCUMENT # N0200002466

ROOTS	&	CULTURE	DANCE	ENSEMBLE,	INC.
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ROOIS 8	k CULTURE DANCE ENSEME	BLE, ING.	I	03 OCT 17 PM 12: 55				
Principal Place 6833 SW 39TH MIRAMAR FL		Mailing Address 6833 SW 39TH DR MIRAMAR FL 33023		7	SECRETARY OF STATE FALLAHASSEE FLORIDA			
					<u> </u>			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<del>-</del> 1	CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number	4. FEI Number Applied For			
Zip Country		Zip Country			38.75 / \$8.75	Not Applicable		
		_		5. Certificate of St	Ree Requ			
	6. Name and Address of Curren	t Registered Agent	Name	7. Name and Add	ress of New Registered Agent	-		
	ON, ANGELA		Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
	v 39th DR R FL 33023		Silest reduces		<del></del>	<del></del>		
Jun Vano	1116 00450		City		<b>₽</b> Zip Ci	ode		
8. The above	e named entity submits this statement f	for the purpose of changing its r	registered office or regis	stered agent, or both, in	- FL			
	ations of registered agent.	, , , , , , , , , , , , , , , , , , ,	3	,				
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if applicable. (NOTE:	Registered Agent signature requ	uired when reinstating)	DATE			
· · · · · · · · · · · · · · · · · · ·			<del></del>		<del></del>			
	•	9. Election Cam Trust Fund Co		\$5.00 May Be Added to Fees	Make Check Payab Florida Department o			
	tember 10, 2003, min will be \$	236.25 Trust Fund Co		Added to Fees		f State		
After Sep	tember 10, 2003, min will be \$  t OFFICERS AND D	236.25 Trust Fund Co	ontribution.   11.  TITLE	Added to Fees ADDITIONS/CHANG	Florida Department o	IN 10 e		
After September 10. TITLE NAME STREET ADDRESS	tember 10, 2003, min will be \$  OFFICERS AND D  PITTERSON, ANGELA 6833 SW 39TH DR	Trust Fund Co	TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANG	Florida Department o	IN 10 e		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	tember 10, 2003, min will be \$  OFFICERS AND D  PITTERSON, ANGELA	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees  ADDITIONS/CHANG  10/17/03	Florida Department o	in 10 e		
After Septing 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Tember 10, 2003, min will be \$  OFFICERS AND D  DP; PITTERSON, ANGELA 6833 SW 39TH DR MIRAMAR FL 33023  DV SAUNDERS, VIVIEN	Trust Fund Co	ntribution.	Added to Fees  ADDITIONS/CHANG  10/17/03	Florida Department o	in 10 e		
After Septing 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Tember 10, 2003, min will be \$  OFFICERS AND D  DP : PITTERSON, ANGELA 6833 SW 39TH DR MIRAMAR FL 33023  DV SAUNDERS, VIVIEN 3390 FOXCROST RD #C316	Trust Fund Co	ntribution.   11.  Tifle  NAME  STREET ADDRESS  CITY-ST-ZIP  TIFLE	Added to Fees  ADDITIONS/CHANG  10/17/03	Florida Department o	in 10 e		
After Septine.  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	tember 10, 2003, min will be \$  \[ \text{OFFICERS AND D} \]  \[ \text{DP} : \]  PITTERSON, ANGELA \]  6833 SW 39TH DR \]  MIRAMAR FL 33023 \]  DV \[ SAUNDERS, VIVIEN \]  3390 FOXCROST RD #C316 \]  MIRAMAR FL 33025 \]  DS :	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees  ADDITIONS/CHANG  10/17/03	Florida Department o	State IN 10 e		
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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 it 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:

CITY-ST-ZIP

305-577-3173