

FILED
Jul 30, 2003 8:00 am
Secretary of State

07-07-2003 90136 037 ****70.00

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

DOCUMENT # N02000004229

1. Entity Name
TEENS ON THE GREENS FOUNDATION, INC.



55052721

Principal Place of Business
11866 S.W. 100 TERRACE
MIAMI, FL 33186

Mailing Address
11866 S.W. 100 TERRACE
MIAMI, FL 33186

2. Principal Place of Business
15016 SW 22 STREET
Suite, Apt. #, etc.

3. Mailing Address
15016 SW 22 STREET
Suite, Apt. #, etc.

City & State
MIRAMAR FL
Zip Country

City & State
MIRAMAR FL
Zip Country

4. FEI Number
46-0492094
Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROKER, RENAULD E
11866 S.W. 100 TERRACE
MIAMI, FL 33186

7. Name and Address of New Registered Agent

Name
RENAULD E. ROKER
Street Address (P.O. Box Number is Not Acceptable)
15016 SW 22 STREET
City MIRAMAR FL Zip Code 33027

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 Renauld E. Roker June 27, 2003
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when monitoring) 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
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME ROKER, RENAULD E
STREET ADDRESS 11866 S.W. 100 TERRACE
CITY-STATE-ZIP MIAMI, FL 33186

TITLE T
NAME ROKER, DEBORAH
STREET ADDRESS 15016 SW 22 ST
CITY-STATE-ZIP MIAMI, FL 33027

TITLE
NAME MARVIN FINLEY
STREET ADDRESS 4701 KENISTON
CITY-STATE-ZIP LOS ANGELES, CA 90043

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
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STREET ADDRESS
CITY-STATE-ZIP

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STREET ADDRESS
CITY-STATE-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 all other like empowered.

SIGNATURE: Renauld E. Roker June 27, 2003 954499-9022
Signature and typed or printed name of signing officer or director Date Cayman Phone #