FILED

03 JUN -6 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DOCUMENT # N02000004657

1. Entity Name
DADE CAB FOUNDATION, INC.

600020565096
06/06/03--01050--001 **70.00

Principal Place of Business	Mailing Address
940 N.E. 144 STREET MIAMI, FL 33161	940 N.E. 144 STREET MIAMI, FL 33161

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
940 N.E. 144 St Suite, Apt. #, etc.	545 NE 121 St Suite, Apt. #, etc.
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33161 Country:	Zip: 33161 Country: DADE

4. FEI Number ☐ 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
REMARAIS/JEAN D 940 N.E. 144 STREET MIAMI, FL 33161	Name: Power Mens Street Address (P.O. Box Number is Not Acceptable): 545 N.E 121 St City: Miami FL FL Zip Code: 33181

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: Power Mens DATE: 5/30/03
(Signature, typed or printed name of registered agent and title if applicable) (MORE: Registered Agent signature required when changing)

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete: PS Mens - Power 545 NE 121 St MIAMI FL 33181	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition: Mens Power 545 NE 121 St Miami FL 33181
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete: TRE Jean G. Joseph 940 N.W. 131 St Miami FL 33168	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete: SEC Jean Danie REMARAIS 940 N.E. 144 St Miami FL 33161	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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 business organized 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: Power Mens 5/30/03
(SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL) (TITLE OR DIRECTOR) (Date) (Daytime Phone #)

jp 6/6