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

DOCUMENT. # N02000005829 1. Entity Name

J

UNITED CHILDREN'S FOUNDATION, INC.



FILED 03 NOV 19 AM 8: 37 SECRETARY OF STATE TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4960 SW 101 AVENUE 4960 SW 101 AVE								00 0 0 SF 0 S	rr nari	19 7 7	~		
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.					INS A HENOTWATEN HIS SPACED						
City & Stat		City & State COOPER CITY				4. FEI Number 5	Applied Not Ap	d For plicable					
Zip 33328	Country Zip USA 33328				Country USA					8.75 Addition ee Required	al		
						7. Name and Address of Current Registered Age Name ROBERT BUCCELLATO					Agent		
:	D	RITE			Street Address (P.O. Box Number is Not Acceptable)								
	1	ACE			4960 SW 101 AVENUE								
, .													
8. The above	y submits this statement fo	register	ered office or registered agent, or both, in the state of Florida. I am familiar with, and ac						accept				
the obligations of registered agent 700024821267 11/13/0301008009 ***70.00													
SIGNATURE CONTRACT SIGNATURE ROBERT BUCCELLATO, PRES/DIR. 11/12/03													
Signature, typed or printed name of higherered agent and here it applicable. (NOTE: Registered Agent signature required when reinstaling) DATE													
	9. Election Can Trust Fund C				\$5.00 May Be Added to Fees			Payable to nent of State	e				
		Amended UBR		, <u></u>	-								
10. OFFICERS AND DIRECTORS								<u></u>		<u>.</u>		(0) (05)	
NAME STREET ADDRESS	NAM		E ET ADDRESS						3 (12)				
CITY-ST-ZIP 4960 SW 101 AVE., COOPER CITY, FL 33328						ity-St-ZiP						CR2E037B (12/02)	
title Name	VP, D					TLE AME					CR2E		
STREET ADDRESS ANNA L. HILTON-BUCCELLATO						ET ADDRESS							
CITY-ST-ZIP TITLE			CITY-ST-ZIP TITLE		<u> </u>	<u></u>			{				
NAME T STREET ADDRESS APRIL KIRK						NAME STREET ADDRESS							
CITY-ST-ZIP								DO NOT WRITE					
TITLE NAME						E		IN THIS SPACE					
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NAME					NAM	e Et address							
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TITLE NAME					TITLE NAM			a.*					
STREET ADDRESS	STREET ADDRESS						ET 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												nation	
of the cer	poration of the	na receiver or trustee emp	owered to e>	curate and that m ecute this report	y signal as req	ure shall ha uired by Chi	ve the s apter 61	ame legal effect as 7. Florida Statutes;	if made under or and that my nar	ath; that I ar ne appears	n an officer or d in Block 10 or d	rector on an	
	attagnment with an an address with all other like stop wered. ROBERT BUCCELLATO, PRES. 11/12/03 954-662-5663												
SIGNAT	SIGNATURE: KUBERT BUCCELLATU, PRES. 11/12/03 934-002-3003												

November 12th 2003

Reinstatement Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: UNITED CHILDREN'S FOUNDATION, INC. Charter# N02000005829

To Whom It May Concern:

I respectfully request that the State of Florida abate the reinstatement fees associated with this late filing. United Children's Foundation, Inc. has no recollection of ever receiving their annual notice. We are deeply sorrowful for that our organization has fallen into the status of being Administratively Dissolved and ask of your consideration in accepting our apology. Now that we are mindful of this required annual filing, the United Children's Foundation, Inc. will file on a timely basis.

Enclosed you will find payment of \$70.00 for our 2003 Uniform Business Report. We once again respectfully request that you abate any reinstatement fees. United Children's Foundation, Inc fully intends to keep our corporation active. If you should have any questions please contact me directly. I would like to thank you in advance for your attention to this matter.

Sincere regards,

United Children's Foundation, Inc Robert Buccellato, President/Director

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