

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

**FILED**  
**Apr 14, 2003 8:00 am**  
**Secretary of State**

03-31-2003 90130 017 \*\*\*\*61.25

**DOCUMENT # N02000007344**

1. Entity Name  
**REACH ! INC.**



Principal Place of Business  
**2200 S. DIXIE HWY. STE. 701  
MIAMI FL 33133**

Mailing Address  
**2200 S. DIXIE HWY. STE. 701  
MIAMI FL 33133**

**55025132**

2. Principal Place of Business

3. Mailing Address  
**3125 Jackson Ave**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
**MIAMI FL**

4. FEI Number

**applied for**

☒ Applied For  
☐ Not Applicable

Zip

Country

Zip  
**33133**

Country  
**USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPIEGEL, HENRI  
790 W. 49TH STREET  
MIAMI BEACH FL 33140**

Name **MARIA T. PANTIN**

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

**3125 Jackson Ave**

City **MIAMI**

FL

Zip Code  
**33133**

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 **Maria T. Pantin**

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

(NOTE: Registered Agent signature required when reinstating)

**3-23-03**

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 **PD** ☐ Delete  
NAME **FULTON, STANLEY**  
STREET ADDRESS **2200 S. DIXIE HWY. STE. 701**  
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **VTD** ☐ Delete  
NAME **PANTIN, TERE**  
STREET ADDRESS **3125 JACKSON AVE.**  
CITY-ST-ZIP **COCONUT GROVE FL 33133**

TITLE **SD** ☒ Delete  
NAME **SPIEGEL, HENRI**  
STREET ADDRESS **790 W. 49TH STREET**  
CITY-ST-ZIP **MIAMI BEACH FL 33140**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME **CHARLES BAUER**  
STREET ADDRESS **3125 Jackson Ave**  
CITY-ST-ZIP **MIAMI FL 33133**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET 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 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: **MARIA T. PANTIN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/23/03**

Date

**(305) 285-9108**

Daytime Phone #

CR2E037 (10/02)