

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N05096

1. Entity Name

NATIONAL MINORITY SUPPLIER DEVELOPMENT COUNCIL O

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90054 049 ****70.00

Principal Place of Business

Mailing Address

7200 LAKE ELLENOR DR
STE 242
ORLANDO FL 32809
US

7200 LAKE ELLENOR DR
STE 242
ORLANDO FL 32809-5742
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2547257

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

ALI, MALIK
545 VERN DRIVE
ORLANDO FL 32805

Name

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

City

FL

Zip Code

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.

SIGNATURE

Malik Ali

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/4/99

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
KEVIN GASTON ☐ Delete
445 W AMELIA
ORLANDO FL 32801

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
ERRICK YOUNG ☐ Delete
500 S ORANGE AVE
ORLANDO FL 32802

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
DENISE MULLEN ☒ Delete
4407 PARKBREEZE
ORLANDO FL 32792

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
NANCY FREEMAN ☐ Change ☐ Addition
8800 ADAMO DR
TAMPA, FL 33611

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
PALUMBO, ROBERT ☒ Delete
2180 WEST STATE ROAD 434 SUITE 6150
LONGWOOD FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Kelly Cornish ☐ Change ☐ Addition
1770 N. 56th St.
Tampa, FL 33619

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DED
ALI, MALIK ☐ Delete
7200 LAKE ELLENOR DR, STE 242
ORLANDO FL

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MIC
GOUN, MARK ☒ Delete
7621 N 56TH ST
TAMPA FL 33617

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Leydi Yunez ☐ Change ☐ Addition
11491 Rocket Blvd
Orlando, FL 32824

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:

Malik Ali

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/4/99

407-859-3906

CR2F037 (9/99)