## 2004 NOT-FOR-PROFIT CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OR P

INTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Phone #

## FILED ANNUAL REPORT (AR) Feb 11, 2004 8:00 am DOCUMENT # N09664 **Secretary of State** 1. Entity Name 02-11-2004 90032 021 \*\*\*\*70.00 FLORIDA BLACK BELT ASSOCIATION, INC. Principal Place of Business Mailing Address 14800 MIAMI LAKE WAY SOUTH MIAMI LAKES FL 33014 14800 MIAMI LAKE WAY SOUTH MIAMI LAKES FL 33014 2. Principal Place of Business 3. Mailing Address VE イカーの LAKE SARAWAK AVE 14201 LAKE SARANAC Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) IAMI City & State Z 4. FEI Number Applied For 59-2646904 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 0 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MAXUEREYES, MANUEL Address (P.O. Box Number is Not Acceptable) 14800 MIAMI LAKE WAY SOUTH AVE MIAMI LAKES FL 33014 JJ AM ( 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 MANUEL SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. $\Box$ Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE Change Addition REYES, MANUEL NAME NAME SARANAC 14800 MIAMI LAKE WAY SOUTH 4201 STREET ADDRESS STREET ADDRESS MIAMI LAKES FL 33014 CiTY-ST-7IP CITY-ST-ZIP MIAMI ☐ Change TITLE ☐ Delete TITLE SARANÃC AVE REYES, MANUEL JR. NAME NAME 14800 MIAMI LAKE WAY SOUTH STREET ADDRESS STREET ADDRESS FL 3301 X MIAMI LAKES FL 33014 City-ST-ZIP CITY-ST-7IP TD LAKE SARANAC AVE TITLE ☐ Addition TITLE ☐ Delete REYES, VIVIAN ... . ... NAME 14800 MIAMI LAKE WAY SOUTH LAICES, FL 33014 STREET ADDRESS STREET ADDRESS MIAMI LAKES FL 33014 CITY-ST-ZIP CITY-ST-ZIP LAKE SARANAC Change Addition SD ☐ Delete TITLE TITLE REYES, MILAGROS NAME 14800 MIAMI LAKE WAY SOUTH CAICES MIAMI 3301 > STREET ADDRESS STREET ADDRESS MIAMI LAKES FL 33014 CITY-ST-7IP CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Chance Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 agolysis, with all other like empowered.