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

DOCUMENT # N16169

1. Entity Name

FRIENDSHIP COOPERATIVE PRESCHOOL, INC.



FILED Feb 03, 2003 8:00 am Secretary of State

02-03-2003 90029 014 ****61.25

							
Principal Plac	ce of Busines:	3	Mailing Address				
8601 S.W. 199TH ST. MIAMI FL 33189		8601 S.W. 199TH ST. MIAMI FL 33189					
							HANA BIANA BIANA BIANA HANA
2. Principal P	Place of Busin	ess	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 59	4. FEI Number 59-2040532 Applied For Not Applied		
Zip		Country	Zip	Country .	5. Certificate of Stat		.75 Additional
	6. Name	and Address of Current	Registered Agent		7. Name and Addre	ss of New Registered Age	nt
پ				Name	•		
O'CONNELL, GERALDINE				Street Address (P.O. Bo		t Acceptable)	
9390 DOMINICAN DR.					·		
1 MIAMI F	L 33189						
				City		FL	Zip Code
8. The above	named entity	submits this statement fo	r the purpose of changing its	l s registered office or re	gistered agent, or both, in th	e State of Florida. I am fam	iliar with, and accept
the obligat	tions of regist	ered agent.					
SIGNATURE.	Sinnature typed	or printed name of registered agent a	and title if applicable (NO)	TE: Registered Agent signature r	required when rejoctation)	DATE	
	organizatio, typou	or printed trained training to the degradate	The title it approaches.	TE. Hogistolog Figure signature i	oquiou momentumg/	DATE.	
	EII E NOW	: FEE IS \$61.25	9. Election Ca	mpaign Financing	\$5.00 May Be	Make Check P	avable to
•	LILE MOM	: FEE 15 \$01.25	Trust Fund	Contribution.	Added to Fees	Florida Departme	
		OFFICERO AND DIE	PEOTODO	·· • • • • • • • • • • • • • • • • • •	ARRITIONS ISLANDS	TO OFFICERS AND DIREC	77000 111 10
10.	VPD	OFFICERS AND DIF				STO THEFT ERS AND THREE	
NAME !				11.	ADDITIONS/CHANGES		
		MARLEGNE	☐ Delete	TITLE NAME	ADDITIONS/CHANGES		Change Addition
STREET ADDRESS	YOUNG,	MARLEGNE V 88 AVE		TITLE	ADDITIONS/CHANGES		
	YOUNG,	N 88 AVE		TITLE NAME	ADDITIONS/CHANGES		
STREET ADDRESS	YOUNG, 17345 SV MIAMI FL PD	N 88 AVE . 33157		TITLE NAME STREET ADDRESS	ADDITIONS/CFANGES		
STREET ADDRESS CITY-ST-ZIP TITLE NAME	YOUNG, 17345 SV MIAMI FL PD O'CONN	N 88 AVE . 33157 ELL, GERALDINE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ADDITIONS/CFANGES		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	YOUNG, 17345 SV MIAMI FL PD O'CONN 9390 DO	N 88 AVE . 33157 ELL, GERALDINE MINICAU DR	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ADDITIONS/CITANGES		Change Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	YOUNG, 17345 S\ MIAMI FL PD O'CONN 9390 DO MIAMI FL T RICHARE 18425 S\	N 88 AVE . 33157 ELL, GERALDINE MINICAU DR DS, BRENDA N 88 CT.	☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TO STREET ADDRESS CITY-ST-ZIP TITLE	Brown, Christine 620 SW 163 Terr Niami, FL 3315°	7	Change Addition Change Addition Change Addition
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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: (S) 305-235-583

CH2E037 (10/0