

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N20643

1. Entity Name

OPA-LOCKA RESCUE MISSION, INC.

**FILED**  
**Jun 30, 2002 8:00 am**  
**Secretary of State**

05-29-2002 90675 027 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

2199 ALI-BABA AVENUE  
 OPA-LOCKA FL 33054  
 US

P.O. BOX 54-1491  
 OPA-LOCKA FL 33054  
 US

2. Principal Place of Business

4450 NW 135 ST.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

OPA-LOCKA FL

City & State

4. FEI Number

59-2807415

Applied For

Not Applicable

Zip

33054

Country

USA

Zip

Country

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

TYDUS, ROSE  
 1101 DUNAD AVE  
 OPA-LOCKA FL 33054

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

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

Rose Tydus

(NOTE: Registered Agent signature required when reinstating)

4/27/02

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 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

P  
 TYDUS, ROSE  
 1101 DUNAD AVE  
 OPA LOCKA FL 33054

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

VP  
 DARTY, ROXIE  
 970 NE 113 STREET  
 BISCAYNE PARK FL

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

D  
 DAUGHTREY, NEWALL-J  
 2331 NW 140TH ST  
 OPA LOCKA FL

☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

D  
 GARVIN, JOSHUA M  
 1281 NW 87TH ST  
 MIAMI FL

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

D  
 WATSON, TOMMY  
 19900 S.W. 260 ST.  
 HOMESTEAD FL 33031

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

D  
 DARTY, ROXIE  
 970 NE 113 ST.  
 Biscayne Park, FL

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
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 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/02

(305) 687-4110

CR2E037 (9/01)