

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 24, 2001 8:00 am**  
**Secretary of State**

07-24-2001 90039 017 \*\*\*\*61.25

**DOCUMENT # N25003**

1. Entity Name

**REFUGE TEMPLE, INC.**

*LN*

Principal Place of Business

2708 N.W. 14 COURT  
 FT. LAUDERDALE FL 33311

Mailing Address

2708 N.W. 14 COURT  
 FT. LAUDERDALE FL 33311

2. Principal Place of Business

*2550 N.W. 15 Street*

Suite, Apt. #, etc.

3. Mailing Address

*2550 N.W. 15 Street*

Suite, Apt. #, etc.

City & State

*Fl. Lauderdale, FL*

City & State

*Fl. Lauderdale, FL*

4. FEI Number

**65-0170361**

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

**WLAH, LOUSIE A**  
**2550 NW 15TH ST**  
**FT LAUDERDALE FL 33311**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**After September 12, 2001, min. will be \$236.25**

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

TITLE ☐ Delete  
 NAME **V**  
 STREET ADDRESS **GIBBONS, JEFFREY**  
 CITY-ST-ZIP **1811 N.W. 9ST**  
**FT. LAUDERDALE FL 33311**

TITLE ☐ Delete  
 NAME **T**  
 STREET ADDRESS **WHITFIELD, ROBERT**  
 CITY-ST-ZIP **2570 N.W. 15 ST**  
**FT. LAUDERDALE FL 33311**

TITLE ☐ Delete  
 NAME **S**  
 STREET ADDRESS **COLLINS, USA**  
 CITY-ST-ZIP **2550 N.W. 15TH ST., APT. #1**  
**FT. LAUDERDALE FL 33311**

TITLE ☐ Delete  
 NAME **T**  
 STREET ADDRESS **STEELE, ANGELA**  
 CITY-ST-ZIP **3851 N.W. 6TH ST.**  
**FT LAUDERDALE FL 33377**

TITLE ☐ Delete  
 NAME **T**  
 STREET ADDRESS **WHITFIELD, LOTTIE M**  
 CITY-ST-ZIP **2570 NW 15 STREET**  
**FT LAUDERDALE FL 33311**

TITLE ☐ Delete  
 NAME **P**  
 STREET ADDRESS **WIAH, LOUISE**  
 CITY-ST-ZIP **2550 N.W. 15 ST**  
**FT. LAUDERDALE**

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  
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 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:

*Louise Wiah*

*7/27/01 (954) 730-9609*

0008824

CR2007 (5/01)