

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2002 8:00 am
Secretary of State

03-11-2002 90061 043 ****61.25

DOCUMENT # N25922

1. Entity Name

THE BLACK YOUTH ENRICHMENT ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**1914 NO. TAMARIND AVENUE
 WEST PALM BEACH FL 33407**

**1914 NO. TAMARIND AVENUE
 WEST PALM BEACH FL 33407**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0667700

Applied For

Not Applicable

Zip

Country

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

**HEYGOOD, MIKE
 625 N FLAGLER DR
 SUITE 700
 WEST PALM BEACH FL 33411**

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

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 **DP** ☐ Delete
 NAME **MUHAMMAD, CARL**
 STREET ADDRESS **1916 NO. TAMARIND AVENUE**
 CITY-ST-ZIP **WEST PALM BEACH FL 33407**

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

TITLE **DS** ☐ Delete
 NAME **DEYONKS, JOSEPH**
 STREET ADDRESS **1610 WEDGEWOOD PLAZA**
 CITY-ST-ZIP **RIVERA BEACH FL 33404**

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

TITLE **DV** ☒ Delete
 NAME **TAYLOR, MERCEDES**
 STREET ADDRESS **927 4TH ST**
 CITY-ST-ZIP **RIVERA BEACH FL 33404**

TITLE **DV** ☐ Change ☒ Addition
 NAME **Walker, Vincent**
 STREET ADDRESS **310 W. 22nd Street**
 CITY-ST-ZIP **Riviera Beach, Florida 33404**

TITLE **D** ☐ Delete
 NAME **KAID, NIEMA**
 STREET ADDRESS **3106 SE 1ST PL**
 CITY-ST-ZIP **BOYNTON BEACH FL 33435**

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

TITLE **D** ☐ Delete
 NAME **FULTON, DOUGLAS**
 STREET ADDRESS **3800 SHELLY RD NO**
 CITY-ST-ZIP **WEST PALM BEACH FL 33401**

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

TITLE **D** ☐ Delete
 NAME **FASHAW, SADIE**
 STREET ADDRESS **1025 PALM BEACH LAKES BLVD**
 CITY-ST-ZIP **WEST PALM BEACH FL 33401**

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:

Niema Kaid, Dir. 2-16-02 561-659-7229

CR2E037 (9/01)