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

FILED Feb 28, 2003 8:00 am Secretary of State

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DOCUMENT # N28209 1. Entity Name SOUTH MIAMS BUSINESS NETWORK, INC.						02-28-2003 90126 009 ****61.25					
Principal P	lace of Busine		Mailing Adalases			1	• :				
C/O NANCY			Mailing Address C/O NANCY WEAR			1	100	29812			
1234 S DIXIE HWY. #337			1234 S DIXIE HWY, #337			10029842					
	LES FL 33146		CORAL GABLES FL 33146				٠.	•		•	
US			US	,				EERI ENEW ANGULE	EN BRANT		
2. Principa	I Place of Busi	ness	3. Mailing Address		-						
Suite, Apt. #, etc.		Suite. Apt. #, etc.			CHECK HERE IF MAKING CHANGES						
City & St	tate		City & State			4. FEI Number 65	5-0070014		I	oplied For]
Zip	 -	Country	Zip	Country						iot Applicable	4
				Country		Certificate of St	atus Desired		.75 Ac		
	6. Name	and Address of Current	Registered Agent			7. Name and Add	ress of New Re			 – –	-
				Name							-
WEAR, NANCY 1234 S DIXIE HWY, #337				Street	Address (P	P.O. Box Number is Not Acceptable)					-
CORAL	GABLES FL	33146					•				1
				City	·	·	·	FL	Zip Coo	ie	1
8. The abov	e named entit	v subnits this statement fo	r the purpose of changing its r	renistered office	Or registero	rd agent or both in t	the Cinter of Clas		Page 100		ļ
the obliga	ations of regist	ered agent.		ogistored emog	or registere	d agent, or cour, in t	uie state di Fibi:	ica. Tæntam	nar with,	and accept	}
5.	ŧ.										Ì
SIGNATURE		or printed name of registered agent (_							1
		3	no usa e applicada. (NOTE:	Registered Agent sign	w berimpen enutil	vhen reinstating)		DATE		-	1
	FILE NOW	: FEE 1S \$61.25	9. Election Camp Trust Fund Co	paign Financing		\$5.00 May Be Added to Fees	Mak Florida	e Check Pa Departme	ayable ent of S	to State	
10.	·		9. Election Camp Trust Fund Co	paign Financing		\$5.00 May Be Added to Fees	Florida	e Check Pa Departme	int of	State	
	DS	: FEE 1S \$61.25	9. Election Camp Trust Fund Co	paign Financing Intribution.		\$5.00 May Be	Florida	e Check Pa a Department	TORS IN	State	(2)
10. TITLE NAME	DS Gaines, D	: FEE IS \$61.25 COFFICERS AND DIR	9. Election Camp Trust Fund Co	paign Financing entribution.		\$5.00 May Be Added to Fees	Florida	e Check Pa a Department	int of	State	0/02)
10. Title Name Street address	DS GAINES, D 1556 CATA	: FEE IS \$61.25 OFFICERS AND DIR ONNA LONIA	9. Election Camp Trust Fund Co	paign Financing intribution. 11.	AC	\$5.00 May Be Added to Fees	Florida	e Check Pa a Department	TORS IN	State	7 (10/02)
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GAINES, D 1556 CATA MIAMI FL	: FEE IS \$61.25 OFFICERS AND DIR ONNA LONIA	9. Election Camp Trust Fund Co	paign Financing ontribution. 11. TILE NAME	AC	\$5.00 May Be Added to Fees	Florida	e Check Pa a Department	TORS IN	State	E037 (10/02)
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP	DS GAINES, D 1556 CATA MIAMI FL 3	OFFICERS AND DIR	9. Election Camp Trust Fund Co	paign Financing sutribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	AC	\$5.00 May Be Added to Fees DDITIONS/CHANGE	Florida	e Check Pa a Departme S AND DIREC	TORS IN Change	State	R2E037 (10/02)
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DS GAINES, D 1556 CATA MIAMI FL : DT BIRTS, MAI	OFFICERS AND DIR ONNA LONIA 13139	9. Election Camp Trust Fund Co ECTORS	paign Financing sutribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	AC	\$5.00 May Be Added to Fees DDITIONS/CHANGE	Florida	e Check Pa a Departme S AND DIREC	TORS IN Change	State	CR2E037 (10/02)
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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:

Davtime Phone #