

2001¹ UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N32001

1. Entity Name

MIGRANT ASSOCIATION OF SOUTH FLORIDA, INC.

Principal Place of Business

8645 W BOYNTON BEACH BLVD
BOYNTON BEACH FL 33437
US

Mailing Address

8645 W BOYNTON BEACH BLVD
BOYNTON BEACH FL 33437
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0149423

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

ASENSIO, CARIDAD
1345 N.E. 5TH AVENUE
BOCA RATON FL 33432

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 PD
NAME ASENSIO, CARIDAD
STREET ADDRESS 1345 N.E. 5TH AVENUE
CITY-ST-ZIP BOCA RATON FL ☐ Delete

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

TITLE VPD
NAME BERRY, CONSTANCE
STREET ADDRESS 3372 FOREST HILL BLVD C-141
CITY-ST-ZIP WEST PALM BEACH FL 33406 ☐ Delete

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

TITLE T
NAME SNELLING, LINDA
STREET ADDRESS 4800 N. FEDERAL HWY #200-E
CITY-ST-ZIP BOCA RATON FL 33431 ☐ Delete

TITLE
NAME SNELLING, LINDA
STREET ADDRESS 165 E. BOCA RATON ROAD
CITY-ST-ZIP BOCA RATON FL 33432 ☒ Change ☐ Addition

TITLE S/D
NAME MAINGOT, DAPHNE
STREET ADDRESS 399 N.W. BOCA RATON BLVD
CITY-ST-ZIP BOCA RATON FL 33487 ☐ Delete

TITLE
NAME
STREET ADDRESS 21301 POWERLINE RD, # 204
CITY-ST-ZIP BOCA RATON FL 33433 ☒ Change ☐ Addition

TITLE BM
NAME RALPH DON
STREET ADDRESS 2501 SO. FEDERAL HIGHWAY
CITY-ST-ZIP DELRAY BEACH FL ☒ Delete

TITLE VPD
NAME TORRES, LUIS
STREET ADDRESS 8645 W. BOYNTON BCH BLVD
CITY-ST-ZIP BOYNTON BEACH FL 33437 ☐ Change ☒ Addition

TITLE BM
NAME GLOVER, JOHN
STREET ADDRESS 301 CRAWFORD BLVD #100
CITY-ST-ZIP BOCA RATON FL 33432 ☒ Delete

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: *Caridad ASENSIO*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/01 (561) 737-6336

Date

Daytime Phone #

CR2E037 (10/00)



DO NOT WRITE IN THIS SPACE