

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90368 013 ****61.25

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1. Entity Name

A.M.H.E. SOUTH FLORIDA CHAPTER, INC.

Principal Place of Business

Mailing Address

YVES JODESTY
1040 NW 10 AV
FORT LAUDERDALE FL 33311

YVES JODESTY
1040 NW 10 AV
FORT LAUDERDALE FL 33311

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

65-0121462

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

JODESTY, YVES
1040 NW 10 AV
FORT 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	P	JODESTY, YVES	1040 NW 10 AV FORT LAUDERDALE FL 33311				
	SD	DUBOIS, JEAN C	601 E SAMPLE RD STE 110 POMPANO BEACH FL 33064				
	TD	MARC, JOSEPH	19100 NW 10TH AV MIAMI FL				
	D	ARMAND, LUCIEN	4100 S HOSPITAL DR 108 FORT LAUDERDALE FL 33317				
	D	DOMOND, LHERISSON	5224 NW 37 AV FORT LAUDERDALE FL 33309				

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 REQUIRED YVES JODESTY 7/5/02

CR2E037 (4/02)