

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N35207

1. Entity Name

METRO TRAFFIC SAFETY INSTITUTE, INC.

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90114 050 ****61.25

Principal Place of Business

1424 N.W. LEJEUNE RD.
MIAMI FL 33126

Mailing Address

1424 N.W. LEJEUNE RD.
MIAMI FL 33126

E0033101



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0158313

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CANTOR, JERRY
1424 N.W. LEJEUNE RD.
MIAMI FL 33126

7. Name and Address of New Registered Agent

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

TITLE D ☐ Delete
NAME GOODSTEIN, DONALD
STREET ADDRESS 8207 NW 74 AVE 9 ISLAND AVE #706
CITY-ST-ZIP MIAMI FL 33139

TITLE D ☒ Delete
NAME LOPEZ, RICHARD
STREET ADDRESS 14620 S.W. 80TH AVE.
CITY-ST-ZIP MIAMI FL

TITLE D ☐ Delete
NAME NEWMAN, DIANN
STREET ADDRESS 245 RIDGEWOOD RD.
CITY-ST-ZIP KEY BISCAYNE FL

TITLE D ☐ Delete
NAME SANCHEZ, JORGE
STREET ADDRESS 1390 BRICKELL AVE 7424 SW 54 AVE
CITY-ST-ZIP MIAMI FL 33143

TITLE D ☐ Delete
NAME CUMINS, SUSAN
STREET ADDRESS 4055 HARDIE ROAD
CITY-ST-ZIP COCONUT GROVE FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE BOARD OF DIRECTORS ☐ Change ☒ Addition
NAME CHRISTINE KANE
STREET ADDRESS 500 SE 5 AVE #5-203
CITY-ST-ZIP BOCA RATON, FL 33432

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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NAME
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: *JERRY CANTOR* EXECUTIVE DIRECTOR 2/22/00 (305) 871-4400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)