

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N36428

1. Entity Name BELMONT TRAINING AND EMPLOYMENT CENTER INC.

FILED

01 JUN -8 AM 9:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

633 N.E 167 STREET SUITE 910
NORTH MIAMI BEACH, FLORIDA 33162

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05/10/01-90133 019 \$70.00

4. FEI Number
65-0277752

Applied For

Not Applicable

5. Certificate of Status Desired **XX** \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

KOROLLAN MEJIA

Street Address (P.O. Box Number is Not Acceptable)

1101 BAY DRIVE

City

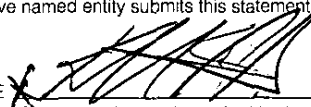
MIAMI

FL

Zip Code
33141

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.

KOROLLAN MEJIA, FINANCIAL ANALYST

(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 ☒ Delete
NAME EDNER JEAN
STREET ADDRESS 111 N.W 152 ST. #18
CITY-ST-ZIP MIAMI FL. 33169

TITLE DIR ☐ Change ☒ Addition
NAME DIRECTOR
STREET ADDRESS RODERICK H. ALLONG
CITY-ST-ZIP 7756 ALHAMBRA BLVD.

TITLE ☒ Delete
NAME BUTLER RAYMOND
STREET ADDRESS 1510 N.W 129 ST.
CITY-ST-ZIP MIAMI FL. 33167

TITLE DIR ☐ Change ☒ Addition
NAME DIRECTOR/ FIN.AID.SPEC.
STREET ADDRESS YVONNE SILVA
CITY-ST-ZIP 10550 N.W 5th ST.
PEMBROKE PINES FL. 33026

TITLE ☒ Delete
NAME SMITH ANGELA
STREET ADDRESS 17800 N.W 27th AVE
CITY-ST-ZIP MIAMI FL. 33169

TITLE D/T ☐ Change ☒ Addition
NAME FINANCIAL ANALYST
STREET ADDRESS KOROLLAN MEJIA
CITY-ST-ZIP 1101 BAY DRIVE
MIAMI BEACH, FL. 33141

TITLE ☒ Delete
NAME WELCH AKUA
STREET ADDRESS 1485 N.W 27th AVE
CITY-ST-ZIP MIAMI FL. 33169

TITLE OF ☐ Change ☒ Addition
NAME COMPUTER PROFESSOR
STREET ADDRESS NOEL JACK
CITY-ST-ZIP 12864 BISCAYNE BLVD. #326
MIAMI, FL. 33181

TITLE ☒ Delete
NAME CAMERON JOHNSON
STREET ADDRESS 17000 N.W 67th AVE #325
CITY-ST-ZIP MIAMI FL 33165

TITLE OF ☐ Change ☒ Addition
NAME OFFICER
STREET ADDRESS DR. MARC JOSEPH
CITY-ST-ZIP 19100 N.W 10th AVE.
MIAMI FL. 33169

TITLE ☐ Delete
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

KOROLLAN MEJIA

CR2E037 (9/99)