2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N41242 Apr 21, 2000 8:00 am Secretary of State 1. Entity Name GROVE OUTREACH, INC. 04-21-2000 90178 042 ****70.00 Principal Place of Business Mailing Address 3460 ROYAL ROAD 3749 GRAND AVENUE COCONUT GROVE FL 33133 MIAMI FL 33133 044110 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-0917275 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) J. PATRICK FITZGERALD P.A. 110 MERRICK WAY SUITE 2-C Zip Code City **CORAL GABLES FL 33134** 8. The above named entity subgrits his statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. Cart to far SIGNATURE DATE Signature, types or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Change Addition TITLE ☐ Delete TITLE NAME NAME GARCIA, GEORGE FR STREET ADDRESS STREET ADDRESS 3460 ROYAL ROAD CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33133** Change ☐ Addition ☐ Delete TITLE TITLE NAME CASTILLO, ROLANDO J FR NAME STREET ADDRESS STREET ADDRESS 3460 ROYAL ROAD CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33133 ☐ Change Addition ☐ Delete TITLE GARCIA, PEDRO NAME STREET ADDRESS STREET ADDRESS 4901 S.W. 93 ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33156 Change ☐ Addition ☐ Delete TITLE TITLE ALDUNCIN, ANGEL NAME NAME STREET ADDRESS STREET ADDRESS 9241 SW 70 ST. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33173** ☐ Change ☐ Addition TITLE ☐ Delete NAME GALLEGO, MATTHEW STREET ADDRESS STREET ADDRESS 2750 SW 22 AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33133 ☐ Change ☐ Addition ☐ Defete TITLE TITLE NAME ESPAILLAT, NITZA M NAME STREET ADDRESS STREET ADDRESS 3460 ROYAL ROAD CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33133 12. Thereby certify that the information supplied with this filling 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.