## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 21, 2000 8:00 am Secretary of State DOCUMENT # N93000001722 1. Entity Name POINCIANA WE CARE, INC. 03-21-2000 90039 022 \*\*\*\*61.25 Mailing Address Principal Place of Business C/O SYLVIA LABER C/O SYLVIA WABER 3524 POINCIANA DRIVE #102 3524 POINCIANA DRIVE #102 824629 LAKE WORTH FL 33467 LAKE WORTH FL 33467-2813 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0407220 Not Applicable Zip Country 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 Street Address (P.O. Box Number is Not Acceptable) 3596 POINCLANA DELY SHAPIRO, JULES # 304 3755 POINCIANA DRIVE MORTH APT. 204 LAKE WORTH FL 33467 23467-2813 8. The above paned entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE red agent and little if applicable Make Check Payable to **FILE NOW:** 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. **X** Addition **B** Delete TITLE PRESIDENT - DIRECTOR TITLE NAME SHAPIRO, JULES NAME ELFANCE SOLL STREET ADDRESS STREET ADDRESS Da . # 304 3755 POINCIANA DR. APT. 204 3580 POWCIANA CITY-ST-ZIP CITY-ST-ZIP WCHTH FL 33461-2813 LAKE WORTH FL 33467 Change Addition Delete TITLE TITLE TD TREASURER - DIRECTOR NAME NAME PINSKEY, FANYE CARCLYN BACHAIRACH STREET ADDRESS STREET ADDRESS 3661 POINCIANA DRIVE 3524 POINCIANA DR., APT. 605 CITY-ST-ZIP CITY-ST-7IP LAKE WONTH LAKE WORTH FL 33467 TITLE ☐ Change Addition TITLE SD Delete SECY - DIRECTUR NAME NAME SHAPIRO, RUTH LILLIAN SILVERBERG STREET ADDRESS 3755 POINCIANA DR. APT. 204 STREET ADDRESS 8465 POINCIANA DRIVE CITY-ST-ZIP CITY-ST-ZIP 33467 LAKE WORTH FL 33467 LAKE WCIETH, FL. TITI F ☐ Change Addition TITLE D ☐ Delete NAME NAME LUBER, SYLVIA STREET ADDRESS STREET ADDRESS 3524 POINCIANA DR., APT. 102 CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33467 Change Delete TITLE ☐ Addition NAME PERLMAN, DORIS STREET ADDRESS STREET ADDRESS 6995 CLOVER STREET

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 reserver 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 attagnment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME STREET ADDRESS

SIGNATURE:

D

LAKE WORTH FL 33467

3810 POINICIANA DR., APT. 408

ROSENBERG, JOAN

LAKE WORTH FL

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

3/17/2000

(561) 433-103 9 Daytime Phone #

Change

☐ Addition