

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Jul 18, 2002 8:00 am
Secretary of State

07-18-2002 90125 024 ****70.00

DOCUMENT # N94000003786

1. Entity Name

OVERTOWN COMMUNITY OPTIMIST CLUB, INC.

Principal Place of Business

Mailing Address

401 N.W. 12TH STREET
MIAMI FL 33136

P.O. BOX 016063
MIAMI FL 33101
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

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

SANCHEZ, CRISTINA
810 NW 145TH STREET
MIAMI FL 33168-3034

Name

Annie R. Gurnen

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

5721 N.W. 21st Avenue

City

Miami

FL

Zip Code

33142

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

Annie R. Gurnen

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

(NOTE: Registered Agent signature required when reinstating)

05-01-02

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 D
NAME BROWN, ALPHONSO
STREET ADDRESS 1450 NW 89TH ST
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE DP
NAME NORIEGA, HAMMOND
STREET ADDRESS 9735 SW 166 TERR
CITY-ST-ZIP MIAMI FL ☒ Delete

TITLE D
NAME SANCHEZ, CRISTINA
STREET ADDRESS 810 NW 145 ST
CITY-ST-ZIP N MIAMI FL ☒ Delete

TITLE V
NAME FLETCHER, YOUNG
STREET ADDRESS 125 N.W. 69TH STREET
CITY-ST-ZIP MIAMI FL 33150 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE P
NAME Washington, Emanuel
STREET ADDRESS 18015 NW 5th Ct.
CITY-ST-ZIP Miami, FL. 331 ☐ Change ☒ Addition

TITLE V
NAME Walker, Norma
STREET ADDRESS 1984 NW 4th Ct.
CITY-ST-ZIP Miami, FL. 33136 ☐ Change ☒ Addition

TITLE S/T
NAME
STREET ADDRESS 5721 NW-21st Ave.
CITY-ST-ZIP Miami, FL. 33136 ☐ Change ☒ Addition

TITLE D
NAME Slater, William
STREET ADDRESS 1640 NW 4th Ave. Apt. 10C
CITY-ST-ZIP Miami, FL. 33136 ☐ Change ☒ Addition

TITLE D
NAME Hanks, Ben
STREET ADDRESS 522 NW 19th St
CITY-ST-ZIP Miami, FL. 33136 ☐ Change ☒ Addition

TITLE D
NAME Williams, Anthony
STREET ADDRESS 1957 NW 3rd Ave.
CITY-ST-ZIP Miami, FL. 33136 ☐ Change ☒ Addition

CR2E037 (9/01)

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: *Annie R. Gurnen*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-01-02

Date

Daytime Phone #