2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N9400004104**

"DO ONTO OTHERS" TRUST, INC.



FILED Jan 09, 2003 8:00 am Secretary of State 01-09-2003 90107 049 ****61.25

						GOO WE THE	'							
Principal Place of Business 2746 S.W. 11TH STREET MIAMI FL 33135			2746	Mailing Address 2746 S.W. 11TH STREET MIAMI FL 33135				1 1 00 211 31 6 28 1	1511 A l a 19 Aa 191 A2 1	1 7 48 131 43 110	86 (1) 8 (8) 1(2)	1 23 117 213 1 1 23	11	
2. Principal Place of Business 3. Ma				Mailing Address									:	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES						
City & State				City & State			4	4. FEI Number 65-0517915				Applied For Not Applicable		
Zip Country Z			p	untry	5	5. Certificate of Status Desired				\$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent							7.	Name and Add	ress of New	Registere	d Agent		\neg	
CELORIO, JUSTINO 2746 S.W. 11TH STREET MIAMI FL 33135						Name Street Addre	ess (P.O.	. Box Number is	Not Acceptabl	e)				
						City				F	Zip C	ode		
	tions of registe	submits this statement for ored agent. It is printed name of registered agent				d Agent signature req			and claid of the	DATE				
FILE NOW: FEE IS \$61.25 9. Election Cam Trust Fund Co							\$5 Ad	5.00 May Be ded to Fees			ck Payab artment o			
10.	OFFICERS AND DIRECTORS						ADDITIONS/CHANGES TO OFFICERS AND DIRE				DIRECTORS	CTORS IN 10		
TITLE NAME Street Address City-St-Zip	PVD CELORIO, (2746 S.W. MIAMI FL 3	11TH STREET		☐ Delete							☐ Chang	e 🗀 Addi	lition CO/OF/	
TITLE NAME STREET ADDRESS CITYST-ZIP_	STD CELORIO, / 2746 S.W. MIAMI FL 3	11TH STREET		☐ Delete							☐ Chang	le □ Addi	ition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, BENITO 4111 S.W. 4TH STREET MIAMI FL 33134										☐ Chang	e 🗌 Addi	tion	
TITLE NAME Street Address City-St-Zip	<i>P</i> :	**************************************		☐ Delete							☐ Chang	e 🗌 Addi	ition	
TITLE NAME Street Address City-St-Zip	÷	1 478		☐ Delete		Į.					☐ Chang	e 🗌 Addi	tion	
TITLE NAME Street Address City-ST-ZIP		:		☐ Delete							Change	e 🗌 Addii	tion	

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 of trustee empowered to execute this report as required by Chapter 61-77 forida 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:

16/03-305-643-0966