2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2001 8:00 am
Secretary of State
03-20-2001 90058 024 ****70.00

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DOCUMENT # N94000006204

1. Entity Name

500 ROLE MODELS OF EXCELLENCE PROJECT, INC.

817776

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1450 N.E. 2ND AVE. STE. 227 MIAMI FL 33132 US	1450 N.E. 2ND AVE. STE. 227 MIAMI FL 33132 US

2. Principal Place of Business	3. Mailing Address
1450 N.E. 2nd Avenue	1450 N.E. 2nd Avenue
Suite, Apt. #, etc.: Suite 227	Suite, Apt. #, etc.: Suite 227
City & State: Miami, FL	City & State: Miami, FL
Zip: 33132 Country: Dade	Zip: 33132 Country: Dade

4. FEI Number: 65-0575014 ☐ 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
WILSON, FREDRICA S 1450 N.E. 2ND AVENUE STE. 227 MIAMI FL 33132	Name: Frederica S. Wilson Street Address (P.O. Box Number is Not Acceptable): 1450 N.E. 2nd Avenue, Suite 227 City: Miami **FL** Zip Code: 33132

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. (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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILSON, FREDERICA S 1450 NE 2ND AVENUE, SUITE 226 MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KOONCE, GEORGE D 14651 SW 94TH AVE MIAMI FL 33176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAWKINS, VINCENT 1450 N.E. 2ND AVE. SUITE 652 MIAMI FL 33132	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DUNN, RAYMOND 2744 NW 47TH LANE LAUDERDALE LAKES FL 33313	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STRACHAN, RICHARD DR 8841 N.W. 14TH AVE. MIAMI FL 33147	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

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: Frederica S. Wilson 3-9-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #