

2000 UNIFORM BUSINESS REPORT (UBR)

6.

FILED
Jul 20, 2000 8:00 am
Secretary of State

06-01-2000 90003 047 ****61.25

DOCUMENT # N95000003442

1. Entity Name

BELIEVERS AND ACHIEVERS INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

**4411 N.W. 13TH CT
 LAUDERHILL FL 33313**

**4411 N.W. 13TH CT
 LAUDERHILL FL 33313-5612**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0597916

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THOMPSON, DEATRICE
 4411 N.W. 13TH CT
 LAUDERHILL FL 33313**

Name

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

City

FL

Zip Code

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 *Deatrice Thompson*
 Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/28/00 *N/A*

**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 **VD** ☒ Delete
 NAME **CLAYTON, LAKITSIA**
 STREET ADDRESS **1202 COLONIAL AVE**
 CITY-ST-ZIP **BLOOMINGTON IL 61701**

TITLE **D** ☐ Change ☒ Addition
 NAME **LORAN Thompson,**
 STREET ADDRESS **4411 NW 13 CT**
 CITY-ST-ZIP **LAUDERHILL, FL 33313**

TITLE **D** ☐ Delete
 NAME **PARKER, ROOSEVELT**
 STREET ADDRESS **4460 SW 24TH ST.**
 CITY-ST-ZIP **HOLLYWOOD FL 33023**

TITLE **D** ☐ Change ☒ Addition
 NAME **Jackie Dorsett-Nichols**
 STREET ADDRESS **3510 SW 32 AVE**
 CITY-ST-ZIP **Hollywood, FL 33023-6306**

TITLE **T** ☒ Delete
 NAME **HURLEY, MARGARET**
 STREET ADDRESS **4050 NW 54TH CT.**
 CITY-ST-ZIP **COCONUT CREEK FL 33073**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: *Deatrice Thompson* **4/28/00**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # **954 733-4382**

CR2E037 (9/99)