

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

FILED
Jan 08, 2003 8:00 am
Secretary of State

01-08-2003 90034 040 ****61.25

DOCUMENT # N95000003550

1. Entity Name
MIAMI AFFORDABLE HOUSING INC.



Principal Place of Business

**6051 MIRAMAR PARKWAY
MIRAMAR FL 33023**

Mailing Address

**6051 MIRAMAR PARKWAY
MIRAMAR FL 33023**

2. Principal Place of Business

5238 NE 6 AVE

Suite, Apt. #, etc.

268

City & State

FORT LAUDERDALE

3. Mailing Address

5238 NE 6 AVE

Suite, Apt. #, etc.

268

City & State

FORT LAUDERDALE

Zip

33334

Country

USA

Zip

33334

Country

USA

4. FEI Number **65-0614961**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DEVASIA, CHUMMAR
2471 NW 182 TER
MIAMI FL 33056**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Chummar Devasia

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

(NOTE: Registered Agent signature required when reinstating)

1/3/03
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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
DEVASIA, CHUMMAR
2471 NW 182 TERR
MIAMI FL 33056** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
CLARKE, LLOYD
6053 MIRAMAR PKWY
PEMBROKE PINES FL 33024** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
ABRAHAM, MARIAM
6053 MIRAMAR PARKWAY
MIRAMAR FL 33023** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MARY PUTHENAPRAK
5100 LEE ST - UNIVEL
LEHIGH ACRES 33971** ☐ Change ☒ Addition

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

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

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

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

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:

SIGNATURE REQUIRED

1/3/03

954-982-1043

CR2E037 (10/02)