

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000004982

1. Entity Name

OPPORTUNITIES AND ENRICHMENT SERVICES, INC.

Principal Place of Business

19700 S.W. 103RD COURT #104
MIAMI FL 33157

Mailing Address

19700 S.W. 103RD COURT #104
MIAMI FL 33157

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

65-0619118

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

BROWN, LOIS W
19700 S.W. 103RD COURT #104
MIAMI FL 33157

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

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 S
NAME WOODSON, BRENDA J
STREET ADDRESS 18010 S.W. 136TH COURT
CITY-ST-ZIP MIAMI FL 33177 ☐ Delete

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

TITLE T
NAME HOLMES, EVELYN
STREET ADDRESS 26711 S.W. 145TH AVENUE ROAD
CITY-ST-ZIP NARANJA FL 33032 ☐ Delete

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

TITLE D
NAME PORTER, MONROE III
STREET ADDRESS 9911 S.W. 162ND STREET
CITY-ST-ZIP MIAMI FL 33157 ☐ Delete

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

TITLE D
NAME JOHNSON, PHYLLIS
STREET ADDRESS 20840 N.W. 38TH PLACE
CITY-ST-ZIP MIAMI FL 33055 ☐ Delete

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

TITLE PD
NAME BROWN, LOIS W
STREET ADDRESS 19700 S.W. 103RD COURT #104
CITY-ST-ZIP MIAMI FL 33157 ☐ 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

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: *Lois W. Brown, President*
Lois W. Brown, President

April 26, 2001 (305) 251-7049
(305) 961-9068

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90183 004 ****61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)