

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 06, 1999 8:00 am
Secretary of State

07-06-1999 90010 024 ****61.25

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1. Corporation Name

CHILDREN OF THE EARTH, INC.

Principal Place of Business

1320 SOUTH DIXIE HIGHWAY, SUITE 949
CORAL GABLES FL 33146

Mailing Address

1320 SOUTH DIXIE HIGHWAY, SUITE 949
CORAL GABLES FL 33146



2. Principal Place of Business

21 6301 BISCAYNE

Suite, Apt. #, etc.

22 215

City & State

23 MIAMI FL

Zip

24 33138

Country

25 DADE

2a. Mailing Address

26 6301 BISCAYNE

Suite, Apt. #, etc.

27 215

City & State

28 MIAMI, FL

Zip

29 33138

Country

30 DADE

3. Date Incorporated or Qualified

03/05/1996

4. FEI Number

65-0645963

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE
NAME SMITH, R CHRISTOPHER
STREET ADDRESS 1320 SOUTH DIXIE HIGHWAY, SUITE 949
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE VD ☒ DELETE
NAME FRAZIER, RALPH
STREET ADDRESS 1320 SOUTH DIXIE HIGHWAY, SUITE 949
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE STD ☐ DELETE
NAME QUIROZ, ROBERTO
STREET ADDRESS 3321 RALEIGH STREET, SUITE B
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME SMITH, R CHRISTOPHER
1.3 STREET ADDRESS 6301 BISCAYNE BLVD, SUITE 215
1.4 CITY-ST-ZIP MIAMI, FL 33138

2.1 TITLE FRAZIER, RALPH VD ☒ Change ☐ Addition
2.2 NAME 6301 BISCAYNE SUITE 215
2.3 STREET ADDRESS MIAMI, FL 33138
2.4 CITY-ST-ZIP

3.1 TITLE STD ☒ Change ☐ Addition
3.2 NAME QUIROZ, ROBERTO
3.3 STREET ADDRESS 6301 BISCAYNE SUITE 215
3.4 CITY-ST-ZIP MIAMI, FL 33138

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director 6/23/99 305-762-7777
Date Daytime Phone #

CR2E037 (1/98)