200	1 UNIFORM BUS	NESS REPO	RT (UB	R)	•		• (
DOCUMENT # N96000001401							\$	
1. Entity Name BUNCHE PARK SPORTS & COMMUNITY CLUB, INC.					AND 1 4 POST POST			
15600Bunche Park W Drive					FILED			
Principal Place of Business 15600 Bunche Park W Drive (Same as Place of Opa Locka, FL 33054-2958 'Business)					01 SEP -4 PM 4: 04			
					SECRETARY OF STATE			
•	,		- /	·	TALLAHASSEE, FL	ORIDA		
Principal Place of Business 3. Mailing Address			-					
Suite, Apt. #, etc. Suite. Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>		DO NOT WRITE IN THIS	SDACE.		
					DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FE! Nur	nber 65-0666265		Applied For : Not Applicable	
Zip	Country	Zip	Country	5. Certifica	ate of Status Desired 💢	\$8.75 A Fee Requir		
	6. Name and Address of Current i	Registered Agent		7. Name a	nd Address of New Registered	Agent		
Eltoro Wallace 3520 SW 190 Terrace				Name Qawi Abdul-Rahman Street Address (P.O. Box Number is Not Acceptable)				
								Pembroke Pines, FL 33029
City					O Bunche Park W. Drive			
8. The above	e named entity submits this statement for	the purpose of changing its r	egistered office o	Opa Locka, r registered agent. or t	- -	330	54	
	_ / /			3				
SIGNATURE	22 A-	QAWI ABDUL-I	RAHMAN		· 8.3/	'-0/		
0	Signature, typed or printed name of registered agent at	nd little if applicable. (NOTE:	Registered Agent signa	ture required when reinstaling)	DATE			
	FILE NOW:	9. Election Campaign I	Financino	* = 00	aga di dina ng Maya salah sa salah di salah salah			
	FEE IS \$61.25	Trust Fund Contribut		\$5.00 May Be Added to Fees Make Check Payable to Department of State			- Garagean e e e e	
10.7	OFFICERS AND DIRI	CTORS	11.	ARDITIONS IC	HANGES TO OFFICERS AND DIF		1.10	
îi)	D	X Delete	TITLE	D/P	MANGES TO OFFICERS AND DIF	Change	X Addition	
NA RE	Donald White	. .	NAME	Roy Griff				
CITY-ST-ZIP	15600 Bunche Park Opa Locka, FL 3305		STREET ADDRESS CITY-ST-ZIP		600 Bunche Park W Drive a Locka, FL 33054-2958			
TITLE	D/V	☐ Delete	TITLE	ора госка 	. FL 33U34-293	Change	Addition	
NAME STREET ADDRESS	Qawi Abdul-Rahman		NAME	40	4000045753049 -09/07/0101078002 ******70.00 ******70.00			
CITY-ST-ZIP	15600 Bunche Park Opa Locka, FL 3305	W Driv e	STREET ADDRESS CITY-ST-ZIP					
TITLE	D/T	☐ Delete	TITLE				Addition	
NAME STREET ADDRESS	Herbert Jones		NAME				-	
CITY-S1-ZIP	3096 NW 102nd St Miami, FL 33147	•	STREET ADDRESS CITY-ST-ZIP					
TITLE	iniami, in July	☐ Defete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME CAREET ADDOCCO				;	
CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE NAME		☐ Detete	TITLE			Change	Addition	
STREET ADDRESS	•		NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP		/ R.D.			
TITLE NAME		☐ Delete	TITLE			☐ Change	Addition -	
STREET ADDRESS	,		NAME STREET ADDRESS					
CHTY-ST-ZIP			CITY-ST-ZIP					

12. Thereby certify that the information supplied with this filling 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 efficer 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:

Chans AQ

QAWI ABDUL-RAHMAN

8-3/-01 (305) 769-4907