

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000001546

1. Entity Name

AMERICAN FRIENDS OF LITTLE CHILDREN, INC.

Principal Place of Business

11100 S.W. 60 AVE.
PINECREST FL 33156

Mailing Address

C/O MIGUEL VIYELLA
11100 S.W. 60 AVE.
PINECREST FL 33156

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

65-0777491

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

VIYELLA, MIGUEL
200 S. BISCAYNE BLVD., STE. 3200
MIAMI FL 33131

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
After September 12, 2001, min. will be \$236.25

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 P
NAME VIYELLA, MIGUEL ☐ Delete
STREET ADDRESS 200 S. BISCAYNE BLVD. SUITE 3200
CITY-ST-ZIP MIAMI FL 33131

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

TITLE V
NAME PORTSCHIE, LIA ☐ Delete
STREET ADDRESS ONE BISCAYNE TOWER
CITY-ST-ZIP MIAMI FL 33131

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

TITLE T
NAME CONCEPCIOR, CARLOS ☐ Delete
STREET ADDRESS 1015 PONCE DE LEON BLVD # 11
CITY-ST-ZIP MIAMI FL 33145

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

TITLE S
NAME VIYELLA, SONNIA ☐ Delete
STREET ADDRESS 200 S. BISCAYNE BLVD. SUITE 3200
CITY-ST-ZIP MIAMI FL 33131

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

TITLE D
NAME WEISS, BRIAN ☐ Delete
STREET ADDRESS 8801 SW 102ND ST.
CITY-ST-ZIP MIAMI FL 33176

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

TITLE D
NAME GREEN, BARTH ☐ Delete
STREET ADDRESS 620 SABAL PALM ROAD
CITY-ST-ZIP MIAMI FL 33137

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:

SIGNATURE REMIGUEL VIYELLA September 7, 2001 (305)372-5811

FILED
Sep 13, 2001 8:00 am
Secretary of State

09-13-2001 90001 024 ****70.00

978177



DO NOT WRITE IN THIS SPACE

0007558

CR2E037 (5/01)