## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 25, 2000 8:00 am Secretary of State DOCUMENT # N9700003706-1. Entity Name FAMILY RESOURCES CENTER INC. 04-25-2000 90057 014 \*\*\*\*61.25 Mailing Address Principal Place of Business 10223 SW 180TH ST 10223 SW 180TH ST PERRINE FL 33157-5243 PERRINE FL 33157 TUUZUUUI 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0764998 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) WATSON, SIMEON BISHOP 10223 SW 180TH ST PERRINE FL 33157 City Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME WATSON, SIMEON BISHOP STREET ADDRESS STREET ADDRESS 1409 NE 152ND ST CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33157 ☐ Change **Addition** TITLE TITLE S Delete 🖵 NAME Levy, Nikeycia 169444SW 106 Court SAWYER, EDWARD NAME STREET ADDRESS STREET ADDRESS 4816 N 22ND AVENUE CITY-ST-ZIP CITY-ST-ZIP <u>MIAMI FL 33147</u> Miami FL 33152 ☐ Change ☐ Addition TITLE DT ☐ Delete TITLE NAME HARRIS, CHARLES NAME STREET ADDRESS STREET ADDRESS **5701 NW 4TH AVE** CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change TITLE D Delete TITLE Addition NAME NAME JONES, WILLIE STREET ADDRESS STREET ADDRESS 2261 NW 58TH STREET CITY-ST-ZIP CITY-ST-ZIP <u>Miami FL 33142</u> TITLE Delete TITLE ☐ Change ☐ Addition NAME WASHINGTON, WARREN STREET ADDRESS STREET ADDRESS 11771 SW 1907H ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33177 ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

President

Type 18/200 Baytime Phone #