

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 25, 2002 8:00 am**  
**Secretary of State**

03-25-2002 90143 018 \*\*\*\*70.00

**DOCUMENT # N97000006374**

1. Entity Name

**YETTIE'S OUTREACH & DEVELOPMENT, CORPORATION**

Principal Place of Business

Mailing Address

4001 N. 51 AVENUE  
 HOLLYWOOD FL 33021

4001 N. 51 AVENUE  
 HOLLYWOOD FL 33021

2. Principal Place of Business

**5504 NW 21st St.**

3. Mailing Address

**5504 NW 21st St.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Lauderhill / Florida**

City & State

**Lauderhill / Florida**

Zip

**33313**

Country

**U.S.A**

Zip

**33313**

Country

**U.S.A.**

4. FEI Number

**65-0790363**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**RUSKIN, YETTIE E**  
**4001 N. 51 AVENUE**  
**HOLLYWOOD FL 33021**

7. Name and Address of New Registered Agent

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)

**03/04/2002**  
 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

TITLE NAME	PD RUSKIN, SETH	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	4001 N. 51 AVENUE HOLLYWOOD FL 33021	<i>9352 Autumn Ashby Highlands Ranch, Colorado</i>
TITLE NAME	VPD SHULKES, MYRA	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	6900 TAFT ST. HOLLYWOOD FL 33024	
TITLE NAME	DS WALKER, VILMA	<input checked="" type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	CAPOZE BRONX NY 10453	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	Executive Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	YETTIE E. RUSKIN 4001 N. 51 Ave Hollywood, FL 33021	
TITLE NAME	David Ockman, Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	1040 Weston Rd. Weston, FL 33326	
TITLE NAME	Joyce Cortis	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	1107 Buchanan St. Hollywood, FL 33019	
TITLE NAME	Harry Nash, Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	1107 Buchanan St Hollywood, FL 33019	
TITLE NAME		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 powers.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Yec - Rus (54) 486-1231*

CR2E037 (9/01)