FILED
May 09, 2002 8:00 am
Secretary of State
05-09-2002 90031 002 ****61.25

NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000006947 ✓

1. Entity Name
NEW HEIGHTS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State: PLANTATION FL
Zip: 33318 County:

3. Mailing Address
P.O BOX 15894
Suite, Apt. #, etc.
City & State: Zip: Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 650798993 Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: NUNES DAVID
Street Address: P.O. Box Number is Not Acceptable: 3917 N ANDREWS AVE
City: FT Lauderdale FL Zip Code: 33319

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, within the state of Florida.

SIGNATURE: _____ DATE

FEE: $ 61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fee

Make Check Payable to: Department of State

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP:
JOAN L WONG-FAIT
P.O BOX 15894
Plantation FL 33318
DIRECTOR.

ALL OTHER NAMES REMAIN THE SAME.

DO NOT WRITE IN THIS SPACE

CR2E037A (12/01)

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 on an attachment with an asterisk (*) after each.

SIGNATURE: Joan L. Wong Fait 04/30/02
SIGNATURE AND TYPED OR PRINTED NAME OF PERSON SIGNING (BY HAND) — DATE