

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000000028

1. Entity Name

NEW CONCEPT VISIONS 2000, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90281 009 ****61.25

Principal Place of Business

4011 N.W. 188TH STREET
MIAMI FL 33055
US

Mailing Address

4011 N.W. 188TH STREET
MIAMI FL 33055
US

2. Principal Place of Business

39 N.W. 166 ST.

3. Mailing Address

9965 MIRAMAR PKWY

Suite, Apt. #, etc.

SUITE - 2

Suite, Apt. #, etc.

PHD - 108

City & State

MIAMI, FL

City & State

MIRAMAR, FLORIDA

Zip

33169

Country

Dade

Zip

33025

Country

Dade

6. Name and Address of Current Registered Agent

CROMARTIE, EDORIS
4011 N.W. 188TH STREET
MIAMI FL 33055

4. FEI Number

31-1588754

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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)

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 P ☐ Delete
NAME GILBERT, ROBERT L
STREET ADDRESS 10670 S.W. 20TH CT
CITY-ST-ZIP MIRAMAR FL 33025

TITLE VPD ☐ Delete
NAME CROMARTIE, EDORIS
STREET ADDRESS 4011 N.W. 188TH STREET
CITY-ST-ZIP MIAMI FL 33055

TITLE S ☐ Delete
NAME CROMARTIE, ALELOISE H
STREET ADDRESS 4011 NW 188 ST.
CITY-ST-ZIP MIAMI FL 33055

TITLE TD ☐ Delete
NAME GILBERT, GWENDOLYN
STREET ADDRESS 10670 S.W. 20TH COURT
CITY-ST-ZIP MIRAMAR FL 33025

TITLE VP ☐ Delete
NAME ROSE, CLAYTON R
STREET ADDRESS 2218 LAUREL OAKS DRIVE
CITY-ST-ZIP VALRICO FL 33596

TITLE VPD ☐ Delete
NAME ROSE, IRMA L
STREET ADDRESS 2216 LAUREL OAKS DRIVE
CITY-ST-ZIP VALRICO FL 33596

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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

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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:

Edoris Cromartie, Jr.

EDORIS CROMARTIE, JR.

04/12/01

(305) 947-7797

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)