

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2002 8:00 am
Secretary of State

08-29-2002 90004 033 ****70.00

DOCUMENT # N98000001186

1. Entity Name

MIAMI/MIAMI-DADE WEED & SEED, INC.

Principal Place of Business

Mailing Address

6161 NW 9TH AVENUE
 MIAMI FL 33127

6161 NW 9TH AVENUE
 MIAMI FL 33127

977268

2. Principal Place of Business

645 NW 62nd Street

3. Mailing Address

645 NW 62nd Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 100

Suite 100

City & State

City & State

Miami, FL

Miami, FL

Zip

Country

Zip

Country

33150

USA

33150

USA

4. FEI Number

65-0821017

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

BLACK, ELAINE H
6161 NW 9TH AVENUE
MIAMI FL 33127

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
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 ☐ Delete
 NAME C
 STREET ADDRESS WHITE, PATRICK A
 CITY-ST-ZIP 99 NE 4TH STREET
 MIAMI FL 33132

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

TITLE ☐ Delete
 NAME VC
 STREET ADDRESS COLEY, GLORY
 CITY-ST-ZIP 13334 NW 21ST AVE
 MIAMI FL 33167

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

TITLE ☐ Delete
 NAME T
 STREET ADDRESS FUNEUS, FRED
 CITY-ST-ZIP 1320 NW 62ND STREET
 MIAMI FL 33147

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

TITLE ☐ Delete
 NAME S
 STREET ADDRESS BLACK, ELAINE H
 CITY-ST-ZIP 3015 NW 7TH AVE
 MIAMI FL 33127

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

TITLE ☒ Delete
 NAME D
 STREET ADDRESS FAIR, T. WILLARD
 CITY-ST-ZIP 8500 NW 25TH AVENUE
 MIAMI FL 33147

TITLE ☐ Change ☒ Addition
 NAME D
 STREET ADDRESS Karen Cooper
 CITY-ST-ZIP 1000 NW 62 Street
 Miami, FL 33127

TITLE ☐ Delete
 NAME D
 STREET ADDRESS BAKER-BOUIE, SABRINA
 CITY-ST-ZIP 6161 NW 9TH AVENUE
 MIAMI FL 33127

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 REQUIRED

8/29/02

CR2E037 (4/02)