

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****May 30, 2000 8:00 am**
Secretary of State

05-30-2000 90056 049 ****61.25

DOCUMENT # N98000004733

1. Entity Name

LUBIN'S FOUNDATION, INC.

Principal Place of Business

**7825 NE 2ND AVE
MIAMI FL 33138**

Mailing Address

**7825 NE 2ND AVE
MIAMI FL 33138-4804**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

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

**LUBIN, MICHEL
7825 NE 2ND AVE
MIAMI FL 33138**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME PD
STREET ADDRESS LUBIN, MICHEL
CITY-ST-ZIP 7825 NE 2ND AVE
MIAMI FL 33138TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME VD
STREET ADDRESS MOMPRIER, JACQUES
CITY-ST-ZIP 12595 NE 7TH AVE N
MIAMI FL 33181TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME VD
STREET ADDRESS MARCELLUS, HENRI C
CITY-ST-ZIP 133 NW 45TH TERR
LAUDERHILL FL 33313TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME TD
STREET ADDRESS ST. PREUX, ESTHER
CITY-ST-ZIP 2631 NE 211 TERR
MIAMI FL 33180TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME SD
STREET ADDRESS SAINT PREUX, EUSEE
CITY-ST-ZIP 1110 NE 163RD ST STE 7
N MIAMI BCH FL 33168TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME S
STREET ADDRESS JOSEPH, MARC-ANTOINE
CITY-ST-ZIP 12429 W DIXIE HWY.
MIAMI FL 33161TITLE ☐ 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: *Michel Lubin* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Michel Lubin, President, 5/1/00 305-758-0398

CF2E037 (9/99)