

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90242 020 ****70.00

DOCUMENT # N98000005288

1. Entity Name
**BESS DEVELOPMENT CORPORATION OF SOUTH FLORIDA, I
NC.**



Principal Place of Business
**2275 WEST 5TH WAY
HIALEAH FL 33010**

Mailing Address
**2275 WEST 5TH WAY
HIALEAH FL 33010**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0107450**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**HARVIN, JESSIE JR
2275 WEST 5TH WAY
HIALEAH FL 33010**

Name **Rev. Melvin E. Hymes**

Street Address (P.O. Box Number is Not Acceptable)

5341-45 ST.

City **West Palm Bch.**

FL

Zip Code

33407

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
NAME **HARVIN, JESSIE JR**
STREET ADDRESS **20040 NW 13TH CT**
CITY-ST-ZIP **MIAMI FL 33169**

TITLE **D** ☒ Change ☐ Addition
NAME **HYMES, MELVIN E.**
STREET ADDRESS **5341-45 ST**
CITY-ST-ZIP **WEST PALM BCH., FL. 33407**

TITLE **D** ☐ Delete
NAME **WHITE, SAMUEL**
STREET ADDRESS **18810 NW 48TH CT**
CITY-ST-ZIP **MIAMI FL 33055**

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

TITLE **D** ☐ Delete
NAME **JOHNSON, ANNIE R**
STREET ADDRESS **2240 W LASHAE (6TH) CT**
CITY-ST-ZIP **HIALEAH FL 33010**

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

TITLE **D** ☐ Delete
NAME **BOWENS, JAMES**
STREET ADDRESS **17940 NW 52ND AVE**
CITY-ST-ZIP **MIAMI FL 33055**

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

TITLE **D** ☐ Delete
NAME **BURDGESS, SHIRLEY**
STREET ADDRESS **565 WEST 24TH ST**
CITY-ST-ZIP **HIALEAH FL 33010**

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

TITLE **D** ☐ Delete
NAME **BROWN, HELEN**
STREET ADDRESS **170 ALBATROSS ST**
CITY-ST-ZIP **MIAMI SPRINGS FL 33166**

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:

Rev. Melvin E. Hymes

4/28/03 305-887-2371

CR2E037 (10/02)