

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000006882

1. Entity Name

YOUTH IN ACTION OUTREACH PROGRAM, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90193 010 ****61.25

Principal Place of Business

13580 SW 252 STREET
 PRINCETON 33032
 US

Mailing Address

C/O MANUEL CRUZ
 19655 SW 87TH PLACE
 MIAMI FL 33157-8927

2. Principal Place of Business
 same as above

3. Mailing Address
 same as a bove

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0880071

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

CRUZ, MANUEL
 19655 S.W. 87TH PLACE
 MIAMI FL 33157

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 D ☐ Delete
 NAME CRUZ, MANUEL
 STREET ADDRESS 19655 S.W. 87TH PLACE
 CITY-ST-ZIP MIAMI FL 33157

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

TITLE D ☒ Delete
 NAME CABRERA, FRANCO
 STREET ADDRESS 19001 SW 91 AVE
 CITY-ST-ZIP MIAMI FL 33157

TITLE D ☐ Change ☐ Addition
 NAME Julia Pascual
 STREET ADDRESS 14521 SW 293rd Terrace
 CITY-ST-ZIP Leisure City, FL 33030

TITLE D ☐ Delete
 NAME ROMAN, DAVID
 STREET ADDRESS 650 SW 88TH COURT
 CITY-ST-ZIP MIAMI FL 33174

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

TITLE D ☐ Delete
 NAME PASCUAL, CARLOS
 STREET ADDRESS 12757 SW 257TH ST.
 CITY-ST-ZIP MIAMI FL 33032

TITLE D only address ☒ Change ☐ Addition
 NAME Pascual, Carlos
 STREET ADDRESS 14521 SW 293rd Terrace
 CITY-ST-ZIP Leisure City, FL 33030

TITLE SD ☐ Delete
 NAME OVIDE, LOURDES
 STREET ADDRESS 14275 S.W. 92ND ST.
 CITY-ST-ZIP MIAMI FL 33186

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

TITLE TD ☐ Delete
 NAME CRUZ, MARIA
 STREET ADDRESS 19655 S.W. 87TH PLACE
 CITY-ST-ZIP MIAMI FL 33157

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**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Manuel Cruz

5/1/00 305-257-1003

Date

Daytime Phone #

CR2E037 (9/99)