

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

0006237

DOCUMENT # N99000000074

1. Entity Name

UNITY DELIVERANCE CENTER, INC.



FILED

03 NOV -3 AM 9:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

214 SW NW 21 AVE  
MIAMI FL 33056

Mailing Address

6890 SW 36 STREET  
MIRAMAR FL 33023

2. Principal Place of Business

6151 Miramar Parkway

Suite, Apt., etc.

Suite 309

City & State

Miramar FLA

Zip

33023

Country

3. Mailing Address

6721 Johnson St

Suite, Apt., etc.

Hollywood FLA

City & State

Hollywood FLA

Zip

33024

Country



4. FEI Number 65-0861270

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FRASER-LANE, MELORINE

6890 SW 36 STREET

MIRAMAR FL 33023

7. Name and Address of New Registered Agent

Name

Meliorine Lane Fraser

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

6721 Johnson St

City

Hollywood

FL

Zip Code

33024

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]*

MELORINE LANE FRASER 7-3-03

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  
After September 10, 2003, min will be \$236.25

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

TITLE	D	Delete
NAME	FRASER-LANE, MELORINE	
STREET ADDRESS	6890 SW 36 STREET	
CITY-ST-ZIP	MIRAMAR FL 33023	
TITLE	D	Delete
NAME	FRASER, MICHAEL	
STREET ADDRESS	6890 SW 36 STREET	
CITY-ST-ZIP	MIRAMAR FL 33023	
TITLE	D	Delete
NAME	FRASER, ROBERT	
STREET ADDRESS	6890 SW 36 ST	
CITY-ST-ZIP	MIRAMAR FL 33023	
TITLE	D	Delete
NAME	BYFIELD, MAXINE	
STREET ADDRESS	3615 SW 52 AVE #C-105	
CITY-ST-ZIP	HOLLYWOOD FL 33022	
TITLE	S	Delete
NAME	FRASER, JACINTH	
STREET ADDRESS	6590 SW 36 ST	
CITY-ST-ZIP	MIRAMAR FL 33023	
TITLE		Delete
NAME	Charmaine Ching	
STREET ADDRESS	6721 Johnson St Apt 204	
CITY-ST-ZIP	Hollywood FLA 33024	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		Change	Addition
NAME			
STREET ADDRESS	800023805848		
CITY-ST-ZIP	10/15/03--01023--014 **70.00		
TITLE		Change	Addition
NAME			
STREET ADDRESS	800023805848		
CITY-ST-ZIP	11/03/03--01088--011 **166.25		
TITLE		Change	Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-3-03

Date

Daytime Phone #

CR2E037 (4/03)