

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000001512

FILED
Nov 20, 2009
Secretary of State

Entity Name: FLORIDA ECONOMIC EMPOWERMENT DEVELOPMENT, INC.

Current Principal Place of Business:

4952 N.W. 7TH AVE
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

4952 N.W. 7TH AVE
MIAMI, FL 33127

New Mailing Address:

FEI Number: 31-1640071 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KNOWLES, TARASHALA
4952 N.W. 7TH AVE
MIAMI, FL 33127 US

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: TARASHALA KNOWLES

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: BUCHANAN, HOPE
Address: 4952 N.W. 7TH AVE
City-St-Zip: MIAMI, FL 33127

Title: P () Delete
Name: WEATHERINGTON, ARNIE
Address: 4952 N.W. 7TH AVE
City-St-Zip: MIAMI, FL 33127

Title: DJP () Delete
Name: KNOWLES, TARASHALA
Address: 4952 N.W. 7TH AVE
City-St-Zip: MIAMI, FL 33127

Title: V () Delete
Name: DARLING, GERALD
Address: 4952 N.W. 7TH AVE
City-St-Zip: MIAMI, FL 33127

Title: DOF () Delete
Name: WILLIAMS, VT
Address: 4952 N.W. 7TH AVE
City-St-Zip: MIAMI, FL 33127

Title: DCA () Delete
Name: HARRIS, KEVIN
Address: 4952 N.W. 7TH AVE
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TARASHALA KNOWLES

DJP

11/20/2009

Electronic Signature of Signing Officer or Director

Date