2000 UNIFORM BUSINESS REPORT (UBR)

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FILED
Jul 25, 2000 8:00 am
Secretary of State
05-30-2000 90041 001 ****61.25

DOCUMENT # N99000002441

1. Entity Name

HOMESTEAD PEACE MAKERS INC.

Principal Place of Business	Mailing Address
14230 S.W. 268TH ST. HOMESTEAD FL 33034	14230 S.W. 268TH ST. HOMESTEAD FL 33032-7565

[redacted]

DO NOT WRITE IN THIS SPACE

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 — ☐ 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
LEWIS, MELVIN 14230 S.W. 268TH ST. HOMESTEAD FL 33034	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P LEWIS, MELVIN D 14230 S.W. 268TH ST. HOMESTEAD FL 33034	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUSSINESS MANAGER LORAINE MALLORY 1799 S.W. 8TH ST HOMESTEAD FLA 33030	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V COLEMAN, BENNIE L D 835 WILUET ST. FLORIDA CITY FL 33034	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHORTER, ROBERTA 840 N.W. 10 ST. FLORIDA CITY FL 33034	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SECRETARY/JOINER WAYNE T. JOINER 250 S.E. 8AVE #64 HOMESTEAD FLA 33030	Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURE T ROBERT ELLIS	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURE ROBERT ELLIS 1779 S.W. 8 ST HOMESTEAD FLA 33030	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASSISTANCE SEC. RONALD WATSON 514 S.W. 8AVE #5 HOMESTEAD FLA 33030	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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.

305-258-58

SIGNATURE: SIGNATURE REQUIRED Melvin Lewis 5-12-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #