

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2001 8:00 am
Secretary of State

05-24-2001 90004 031 ****61.25

DOCUMENT # N99000003221

1. Entity Name

FRIENDS OF THE BURN CENTER, INC.

Principal Place of Business

**12651 SOUTH DIXIE HIGHWAY
 SUITE 321
 MIAMI FL 33156**

Mailing Address

**12651 SOUTH DIXIE HIGHWAY
 SUITE 321
 MIAMI FL 33156**

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

65-0939060

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

**AGNETTI, JOHN B. ESQ.
 909 N MIAMI BEACH BLVD.
 SUITE 201
 N MIAMI BEACH FL 33162**

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	T	<input type="checkbox"/> Delete
NAME	LOWE, STEVEN	
STREET ADDRESS	12651 S DIXIE HWY	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	D	<input type="checkbox"/> Delete
NAME	MORROW, TIM	
STREET ADDRESS	6555 W. 26TH DR. #13 BLD 35	
CITY-ST-ZIP	HIALEAH FL 33014	
TITLE	D	<input type="checkbox"/> Delete
NAME	MENDELSON, MEL	
STREET ADDRESS	9751 PALMETTO CLUB LANE WEST	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	P	<input type="checkbox"/> Delete
NAME	KUPINSKI, LAURA	
STREET ADDRESS	12651 SOUTH DIXIE HIGHWAY	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	V	<input type="checkbox"/> Delete
NAME	LLANO, CARLOS	
STREET ADDRESS	12651 SOUTH DIXIE HIGHWAY	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	S	<input type="checkbox"/> Delete
NAME	VAN METTER, NICOLLE	
STREET ADDRESS	12651 SOUTH DIXIE HIGHWAY	
CITY-ST-ZIP	MIAMI FL 33156	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E037 (10/00)

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: *Steven Lowe* **STEVEN LOWE**

5/19/01 **305 338 8319**