## **2001 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** Jul 18, 2001 8:00 am DOCUMENT # N9900006472 **Secretary of State** 1. Entity Name 07-18-2001 90013 043 \*\*\*\*61.25 ABANDONED CHILD FOUNDATION, INC. Mailing Address Principal Place of Business 3697 CORAL TREE CIRCLE 3697 CORAL TREE CIRCLE <del>60073</del>708=---COCONUT\_CREEK.FL:33073 COCONUT=CREEK-FL.33073 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0958236 Not Applicable Country \$8.75 Additional **2** p Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PINTO, MANOEL A 3697 CORAL TREE CIRCLE **COCONUT CREEK FL 33073** Zip Code City FL 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) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees After September 12, 2001, min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. 9520 Swith PLACE TITLE □ Delete TITLE PINTO, MANOEL NAME NAME CORAL SPRINGS, FL. 33071 STREET ADDRESS 3697 CORAL TREE CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **COCONUT CREEK FL 33073** ☐ Change ☐ Addition TITLE ☐ Delete PILTO, JANE PINTO, JANE B NAME 9520 Sw 1th PLACE STREET ADDRESS 3697 CORAL TREE CIRCLE STREET ADDRESS CORAL EPRINGS, FL. 33071 CITY-ST-ZIP **COCONUT CREEK FL 33073** CITY-ST-ZIP Addition TITLE ☐ Delete TITLE PIUTO, ANDERSON PINTO, ANDERSON B NAME NAME 9520 SW 1 +h PLACE 3697 CORAL TREE CIRCLE STREET ADDRESS STREET ADDRESS SPR. NGS, FL. 33071 CITY-ST-ZIP **COCONUT CREEK FL 33073** CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE

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.

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST: ZIP ~

SIGNATURE:

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

07-10-01 (954)227-5400

☐ Change

☐ Addition