

FILED
Jun 05, 2003 8:00 am
Secretary of State

06-05-2003 90131 023 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000052555

1. Entity Name
CLUB EXCELLENCE INTERNATIONAL, INC.



Principal Place of Business

**19380 COLLINS AVE #518-
SUNNY ISLES BEACH, FL 33160**

**19370 Collins Ave #1003
Sunny Isles Bch FL 33160**

Mailing Address

**19380 COLLINS AVE #518
SUNNY ISLES BEACH, FL 33160**

Same.

90138608

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0967674

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRANKLIN, MILTON

19380 COLLINS AVE #518

SUNNY ISLES BEACH, FL 33160

19370 Collins Ave #1003

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|----------------------------|--|---|---|
| TITLE | C <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FRANKLIN, MILTON | NAME | |
| STREET ADDRESS | 19380 COLLINS AVE | STREET ADDRESS | |
| CITY-ST-ZIP | SUNNY ISLES BEACH, FL 33167 | CITY-ST-ZIP | |
| TITLE | V <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FRANKLIN, YOLANDA | NAME | |
| STREET ADDRESS | 19380 COLLINS AVE 518 | STREET ADDRESS | |
| CITY-ST-ZIP | SUNNY ISLES BEACH, FL 33167 | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
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| CITY-ST-ZIP | | CITY-ST-ZIP | |
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| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | 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 607, 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:

Yolanda Franklin - Yolanda Franklin

5-20-03 954-714-3652

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (10/02)

Attachment

90138608
#P0000052555

May 20, 2003

Florida Dept of State
Division of Corporations
Secretary of State
Ms. Katherine Harris
Box 6327
Tallahassee, FL 32314

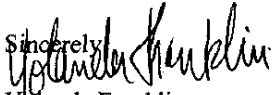
Dear Ms. Harris:

This letter is to inform that Club Excellence did not receive the annual report for May 2003 in the mail as usual. (FEI#65-0967674)

This may be due to the fact that for reasons beyond our control we were forced to change domicile.

The enclosed is an attempt to comply with the requirements indicated by the State of Florida for Club Excellence and we hope it will be accepted as such.

Sincerely,


Yblanda Franklin
Officer of Club Excellence

P.S. Please make note of the Following:
New Address is: 19370 Collins Avenue #1003
Sunny Isles Beach Fl. 33160