

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 25, 2002 8:00 am
Secretary of State

04-21-2002 90899 033 ***150.00

DOCUMENT # P00000092776

1. Entity Name

NORTH CENTRAL REAL ESTATE HOLDING COMPANY

Principal Place of Business

**1180 NORTHWEST 50TH STREET
 MIAMI FL 33127**

Mailing Address

**1180 NORTHWEST 50TH STREET
 MIAMI FL 33127**

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

65-1045782

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

WILLIAMS, LILLIE

**1180 NORTHWEST 50TH STREET
 MIAMI FL 33127**

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

Lillie Williams

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/5/02

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PCEO** ☐ Delete
 NAME **WILLIAMS, LILLIE**
 STREET ADDRESS **1180 NW 50TH ST**
 CITY-ST-ZIP **MIAMI FL 33127**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **VP** ☒ Delete
 NAME **DAVISON, BENNIE**
 STREET ADDRESS **1860 NW 81ST STREET**
 CITY-ST-ZIP **MIAMI FL 33147**

TITLE **V.P.** ☒ Change ☐ Addition
 NAME **CHARLES C DAWKINS**
 STREET ADDRESS **10131 SW 134TH AVE**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE **S** ☒ Delete
 NAME **DAWKINS, NANCY**
 STREET ADDRESS **1385 NW 50TH ST**
 CITY-ST-ZIP **MIAMI FL 33142**

TITLE **S** ☒ Change ☐ Addition
 NAME **TERESA LEFLORE**
 STREET ADDRESS **124 N.W. 102 STREET**
 CITY-ST-ZIP **MIAMI FL 33147**

TITLE **T** ☐ Delete
 NAME **HAYNES, HERCHEL L**
 STREET ADDRESS **4601 NW 15TH STREET**
 CITY-ST-ZIP **MIAMI FL 33142**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lillie Williams*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/02

Date

305-634-3062

Daytime Phone #

CR2E034 (9/01)