

FILED
Jul 10, 2003 8:00 am
Secretary of State

07-10-2003 90107 028 ***550.00

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

DOCUMENT # P01000016061

1. Entity Name
UNITED OUTREACH, INC.



Principal Place of Business
**8010 CLEARY BLVD #105
PLANTATION, FL 33324**

Mailing Address
**8010 CLEARY BLVD #105
PLANTATION, FL 33324**

2. Principal Place of Business

7501 W. Oakland Park Blvd

Suite, Apt. #, etc.

Suite - 306

City & State

Lauderhill, FL 33319

Zip

33319

Country

US

3. Mailing Address

2300 Diana Dr. # 301

Suite, Apt. #, etc.

301

City & State

Hallandale Beh., FL

Zip

33009

Country

US

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-1027569

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TALATI, PETER
8010 CLEARY BLVD #105
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

TALATI, Peter

Street Address (P.O. Box Number is Not Acceptable)

2300 Diana Dr. # 301

City

Hallandale Beh

FL

Zip Code

33009

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **TALATI, PETER**
CITY-ST-ZIP **8010 CLEARY BLVD #105
PLANTATION, FL 33324**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS **TALATI, Peter**
CITY-ST-ZIP **2300 Diana Dr. # 301
Hallandale Beh, FL 33009**

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

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Peter TALATI

7-3-03

Daytime Phone #

(954) 578-4100

CH2E034 (10/02)