

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-19-2000 90098 019 \*\*\*150.00

**DOCUMENT # P96000043305**

1. Entity Name

**ECONOMIC OPPORTUNITY TREATMENT SERVICES, INC.**

Principal Place of Business

5361 N.W. 22ND AVENUE  
 MIAMI FL 33142

Mailing Address

5361 N.W. 22ND AVENUE  
 MIAMI FL 33142-8035

2. Principal Place of Business

700 S. Royal Poinciana Blvd.

Suite, Apt. #, etc.

Suite 300

City & State

Miami Springs, FL

Zip  
 33166

Country  
 USA

3. Mailing Address

700 S. Royal Poinciana Blvd.

Suite, Apt. #, etc.

Suite 300

City & State

Miami Springs, FL 33166

Zip  
 33166

Country  
 USA

4. FEI Number

65-0722429

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

GRIFFITH, RDOLPH D  
 9245 S.W. 157TH STREET  
 SUITE 203  
 MIAMI FL 33157

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

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, 2000 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 NAME STREET ADDRESS CITY-ST-ZIP	PD BROWN, WILLIE L 5361 N.W. 2ND AVENUE MIAMI FL 33142	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVT BROWN, WILLIE L 5361 N.W. 2ND AVENUE MIAMI FL 33142	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Munroe, Anthony E. 700 S. Royal Poinciana Blvd., Suite 300 Miami Spring, FL 33166	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Brown, Willie L. 700 S. Royal Poinciana Blvd., Suite 300 Miami Springs, FL 33166	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Munroe, Anthony E. 700 S. Royal Poinciana Blvd., Suite 300 Miami Spring, FL 33166	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Anthony E. Munroe* Anthony E. Munroe, MPH, CHE

4/28/00

(305) 805-1700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #