

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000027952

1. Entity Name

SOUL TO SOUL, INC.

FILED

Sep 12, 2000 8:00 am  
Secretary of State

09-12-2000 90014 020 \*\*\*550.00

Principal Place of Business

672 NW 62ND STREET  
MIAMI FL 33150

Mailing Address

672 NW 62ND STREET  
MIAMI FL 33150

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 65-0736783

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CHRISTIAN, CAMERON  
6929 NW 5TH AVENUE  
MIAMI FL 33150

7. Name and Address of New Registered Agent

Name

Melonee White

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

10930 NW 14 Ave.

City

Miami,

FL

Zip Code  
33167

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

*Melonee White*

9/7/2000

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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

TITLE P  
NAME CHRISTIAN, CAMERON ☒ Delete  
STREET ADDRESS 6929 NW 5TH AVE  
CITY-ST-ZIP MIAMI FL 33150

TITLE V  
NAME BLASSINGAME, EMERY ☐ Delete  
STREET ADDRESS 6929 NW 5TH AVENUE  
CITY-ST-ZIP MIAMI FL 33150

TITLE T  
NAME BROOKS, VINCE ☒ Delete  
STREET ADDRESS 1171 NW 90TH ST  
CITY-ST-ZIP MIAMI FL 33150

TITLE S  
NAME WHITE, MELANIE ☒ Delete  
STREET ADDRESS 420 NW 202 TERRACE  
CITY-ST-ZIP MIAMI FL 33169

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Change ☒ Addition  
NAME Flossie Blassingame  
STREET ADDRESS 2660 Old Bainbridge Rd #1201  
CITY-ST-ZIP Tallahassee, FL 32303

TITLE V ☒ Change ☐ Addition  
NAME Emery Blassingame  
STREET ADDRESS 672 NW 62 St.  
CITY-ST-ZIP Miami, FL 33150

TITLE T ☒ Change ☐ Addition  
NAME Melonee White  
STREET ADDRESS 10930 NW 14 Ave.  
CITY-ST-ZIP Miami, FL 33167

TITLE S ☐ Change ☒ Addition  
NAME Nichole Blassingame  
STREET ADDRESS 104-19 219 St.  
CITY-ST-ZIP Queens Village, NW 11429

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

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

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:

*Melonee White*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/7/2000  
Date

Daytime Phone #

CR2E034 (5/00)