

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90144 025 ***150.00

DOCUMENT # P97000029564

1. Entity Name

MIAMI PLAYERS, INC.

Principal Place of Business

**10474 SW 72ND ST
 MIAMI FL 33173**

Mailing Address

**10474 SW 72ND ST
 MIAMI FL 33173**

2. Principal Place of Business

13205 SW 137 Ave

3. Mailing Address

Same

Suite, Apt. #, etc.

205

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

FL

Zip

33186

Country

USA

Zip

Country

4. FEI Number

65-0751967

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**JONES, CHARLES
 9900 S 168TH ST
 #9
 MIAMI FL 33157**

7. Name and Address of New Registered Agent

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, 2001 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

TITLE **P** ☐ Delete
 NAME **MERRITT, LISA L**
 STREET ADDRESS **15260 SW 153RD ST**
 CITY-ST-ZIP **MIAMI FL 33187**

TITLE **VP** ☒ Delete
 NAME **MERRITT, LISA L**
 STREET ADDRESS **15260 SW 153RD ST**
 CITY-ST-ZIP **MIAMI FL 33187**

TITLE **ST** ☒ Delete
 NAME **MERRITT, LISA**
 STREET ADDRESS **15260 SW 153RD ST**
 CITY-ST-ZIP **MIAMI FL 33157**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☒ Addition
 NAME **Joseph Maxwell**
 STREET ADDRESS **VP**
 CITY-ST-ZIP **15260 SW 153rd
 Miami FL 33186**

TITLE ☐ Change ☒ Addition
 NAME **Shad Taylor**
 STREET ADDRESS **15260 SW 153rd St**
 CITY-ST-ZIP **Miami FL 33186**

TITLE ☐ Change ☒ Addition
 NAME **Derrick Amos**
 STREET ADDRESS **15260 SW 153rd St**
 CITY-ST-ZIP **Miami FL 33186**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-01 305-971-7416

Date

Daytime Phone #

CR2E034 (10/00)