

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

04-10-2003 90102 031 ***150.00

DOCUMENT # P98000064511

1. Entity Name
COMMUNITY BOOK & DANCE CLUB, INC.



Principal Place of Business
16178 NW 27 AVE
MIAMI FL 33054
US

Mailing Address
16178 NW 27 AVE
MIAMI FL 33054
US

2. Principal Place of Business

3. Mailing Address

16196 N.W. 27th Ave
Suite, Apt. #, etc.

16196 NW 27th Ave
Suite, Apt. #, etc.

City & State
MIAMI, FL

City & State
MIAMI, FL

Zip
33054

Country

Zip
33054

Country

4. FEI Number 65-0730081

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AGYAPONG, LINDA
11320 SW 21 ST.
MIRAMAR FL 33025

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. 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DCEO
NAME AGYAPONG, LINDA
STREET ADDRESS 2620 HURON WAY
CITY-ST-ZIP MIRAMAR FL 33025 ☒ Delete

TITLE Director
NAME AGYAPONG, LINDA
STREET ADDRESS 11320 SW. 21 ST.
CITY-ST-ZIP MIRAMAR, FL. 33025 ☒ Change ☐ Addition

TITLE VP
NAME AGYAPONG, AMA
STREET ADDRESS 2620 HURON WAY
CITY-ST-ZIP MIRAMAR FL 33025 ☒ Delete

TITLE VP
NAME AMA AGYAPONG
STREET ADDRESS 11320 SW. 21 ST.
CITY-ST-ZIP MIRAMAR, FL. 33025 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE VP
NAME KIMBERO BAKER
STREET ADDRESS 11320 SW. 21 ST.
CITY-ST-ZIP MIRAMAR, FL. 33025 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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:

Linda Agyapong
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/03

(305) 628-4110

Date

Daytime Phone #

CR2E034 (10/02)