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NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 710630

(5)

MIAMI BEACH BAR ASSOCIATION

				·F-11			
Principal Place	of Business	Mailing Address			r samen readt sin i mårin dirik kritt f	ON GION DISH BIBIE GIBIE	91911 E \$ 1 1881
420 LINCOLN RD. STE. 256		420 LINCOLN RD. STE. 256					
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139		I		Date Incorporated or Qualified	3a. Date of Last	Report	
U\$		US			03/29/1966	08/07/19	•
	ace of Business	a. Mailing Address	•	/ 1/ n	4. FEI Number		Applied For
21 420	LINCOLN RD. 20		TNCOL	LN RU	59-2291789		Vot Applicable
Suite, A	#. sic .	<u> </u>			5. Certificate of Status Desired		Additional Required
City & State 23	MI BEACH FLOO	City & State MIHMI	BEA	CH F	Election Campaign Financing Trust Fund Contribution		May Be d to Fees
Zip 24 33/34	Country	7 Zip	Countr	y _	8. This corporation has liability for in		199.032,
24 33/5/	9. Name and Address of Current Reg		30 6	<u>ပ</u>		Yes No	
	o. touto and Addition of Surfam Hog	natorou Again	81	1 Name	10. Name and Address of New Re	gistered Agent	
IAV CC	OTT D						
JAY, SCOTT R. 420 LINCOLN ROAD #327				ess (P.O. Box Number is Not Acceptable)		
MIAMI BEACH FL 33139							
MINMI O	DAON 1 E 33 139		-			····	
			84	City		FL 65 Zip	Code
11. Pursuant t	o the provisions of Sections 617.0502 and 6	317.1508, Florida Statute	s, the above	named corpor	ation submits this statement for the purp	oca of chancing its re	egistered office
or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE	•						
	Signature, typed or printed name of registered agent and title			ent signature required		DATE	
12.	OFFICERS AND DIRI		13.	· .	ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	DELETE	1.1 TITLE			Change	Addition
NAME .	WASSERMAN, RICHARD W		1.2 NAME	J	STARR, IVAR !	7	· /
STREET ADDRESS	420 LINCOLN ROAD STE, 256			T ADDRESS	20 LINCOLN R	ONUSTE	<i>737</i>
CITY-ST-ZIP TITLE	MIAMI BEACH FL 33139	DELETE	1.4 CITY - 2 1 TITLE	ST-ZIP	YIAMT BEACT	t FZ 331.	544
NAME	PED Starr, Ivan	Doctor	2 2 NAME	1/2	EU ALLIE	Change	Addition
STREET ADDRESS	420 LINCOLN RD., #437			T ADDRESS	YPEN, MYLES	מ נוגמא	1 - N/
CITY-ST-ZIP	MIAMI BCH. FL 33139		2 4 CHY-	0-	SS AKTAYE GOOL	1444114	TO THOSE
TITLE	FVPD	DELETE	3.1 TITLE	-31-21 / J	LANE DETCHIO	Change	Addition
NAME	CYPEN, MYLES		3.2 NAME	0	DET DA PTCHAK	115	L redución
STREET ADDRESS	825 ARTHUR GODFREY RD., 4TH	FLOOR		T ADDRESS	TELANT, ALLUMAN	ENEW ON	STH
CITY-ST-ZIP	MIAMI BEACH FL 33140		3.4 CITY-		TAXIT DENKI	747 NO.	FIOOR
TITLE	2VP	DELETE	4.1 TITLE	5	UP SS	Change	Addition
NAME	PREIRA, RICHARD J.		4. 2 NAME	1	DRE! AMBONIA	, - , -	
STREET ADDRESS	777 ARTHUR GODFREY ROAD, 4T	H FLOOR	4.3 STREE	TADORESS	ממ על ער מו אורים	~ CTE 33	0
CITY-SI-ZIP	MIAMI BEACH FL 33140		4.4 CITY-1	ST-ZIP	CHITTE ROLL AND	35/50	U
TITLE	3VP	DELETE	5 1 TITLE	3	VP	Change	Addition
NAME	SOBEL, AARON R		5.2 NAME	6	ILLER BAINN	T	
STREET ADDRESS	420 LINCOLN RD. STE. 370		53 STREET	T ADDRESS	75 41 ST STE	301	
CITY-ST-ZIP	MIAMI BCH FL 33139		5.4 CiTY-5	ST-ZIP	TAME BCH. FL	33140	
TITLE	T	DELETE	6.1 TITLE	て	HOEN LANDE	☐ Change	Addition
NAME	GILLER, BRIAN J		6.2 NAME	حة ا	YPEN WITH	// A A A A A	1 2 1/1
STREET ADDRESS	975 41ST. ST. STE. 601			T ADDRESS	25 ARTHYK GOD	FREY RU	グラグ
14 Ldo hereb	MIAMI BEACH FL 33140	in filipp in unit state it. f	6.4 CiTY-5	ST-ZIP	THMI BCH, FL	33440	-Z-W
certiiv mat	certify that the information supplied with the information indicated on this annual rep	ort or suroniemental annu:	al romant le tel	למיוויססים לתחב בעוו	a and that my clanature chall have the co	and land affect on it.	
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.							

SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR M. STARR 3/20/96 (305)533-933