2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713210

FILED Jan 09, 2004 Secretary of State

Entity Name: MIAMI PIONEERS/NATIVES OF DADE, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUSAN P 7930 SW MIAMI, FL		G			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
SUSAN P 7930 SW MIAMI, FL		G			
FEI Number	r: 59-0746816	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
7930 SW	6, SUSAN P 58 CT. IIAMI, FL 33143	3 US			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both	
SIGNATU					
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	P () ENGLISH, EDW 822 MARIANA A MIAMI, FL 331	₩E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VP () FORREST, PET 50 SW 68 AVE. MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	
City-St-Zip:	*				
Title: Name: Address:		Delete ON, HUTSON AVE. 111	Title: Name: Address: City-St-Zip:	() Change () Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	VPD () JAMES-JACKS 5300 WEST 16 HIALEAH, FL 3	Delete ON, HUTSON AVE. 111 3012 Delete ERDA DR.	Title: Name: Address:	() Change () Addition () Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	VPD () JAMES-JACKS 5300 WEST 16 HIALEAH, FL 3 RSD () MARCHESE, G 10860 SW 52 E MIAMI, FL 331	Delete ON, HUTSON AVE. 111 3012 Delete ERDA DR. 65 Delete Y	Title: Name: Address: City-St-Zip: Title: Name: Address:		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN P. REDDING TRD 01/09/2004