FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 13 1998 8:00am

Secretary of State

3-30-96 (25)691-8440

3. Date Incorporated or Qualified

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT #

Principal Place of Business

8350 N.W.7TH AVENUE

STREET ADDRESS

SIGNATURE:

CITY-ST-ZiP

713802

(7)

Mailing Address

8350 N.W.7TH AVENUE

TEAMSTERS LOCAL UNION 769 HOLDING CORPORATION, I

| MIAMI FL 33150 | | MIAMI FL 33150 | | 12/14/1967 | |
|--------------------------------|---|------------------------------------|-----------------------------------|--|-----------------------------------|
| J | | | | 4. FEI Number | Applied For |
| | | | | 65-0312130 | Not Applicable |
| 2. Principal Place of Business | | 2a. Mailing Addross 26 | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 6. Election Campaign Financing | \$5.00 May Be |
| City & State | | City & State | | Trust Fund Contribution | Added to Fees |
| 23 | | 28 | | 7. Is this nonprofit corporation a homeown Yes | ers association? |
| Zip | Country | Zip | Country | 8. This corporation owes or has paid the c | |
| 24 | 25 | · | 30 | Personal Property Tax due June 30. | Yes No |
| <u> </u> | 9. Name and Address of Curren | Hegistered Agent | 81 Name (| 10. Name and Address of New Registere | d Agent |
| | | | | KR Stanton K. E | 59. |
| | TANTON R. ESQ .UE LAGOON DR #150 | | 82 Street Ade | ress (P.O. Box Number is Not Acceptable) | V |
| MIAMI F | | | 83 | 030 PW 1 710100 | |
| MIAMIC | L 33120 | | | | |
| | | | 84 City | ligail F | 1 85 35 35 CO |
| 11. Pursuant | to the provisions of Sections 617.0502 | and 617,1508, Florida Statute | s, the above-named corr | poration submits this statement for the purpose | of changing its registered |
| office or r | registered agent, or both, in the State am familiar with, and accept the obliga | of Florida. Such change was a | uthorized by the corporat | tion's board of directors. I hereby accept the ap- | ppointment as registered |
| | ant latilities with, and accept the obliga | tions or, section of ridges, ridge | nda Sialules. | | |
| SIGNATURE | Signature typed or printed nature of registered age: | r and title it applicable (NOT) | Registered Agent signature requir | red when reinstating) DATE | |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICERS AN | |
| TITLE | ST | DELETE | 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME | BELANS, ROBERT C | | 1.2 NAME | | |
| STREET ADDRESS | 8350 NW 7TH AVE | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL | | 1.4 CITY- ST- ZIP | | |
| TITLE | DP | DELETE | 2.1 TITLE | | Change Addition |
| NAME | CANNESTRO, ANTHONY | | 2.2 NAME | | |
| STREET ADDRESS | 8350 NW 7TH AVE. | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | MIAMI, FL 00000 | DELETE | 2. 4 C(1Y - S1 - ZIP | | Change Addition |
| TITLE | ODEENWELL CIEDLEN C | ר"ו מנונונ | 3.1 TITLE | | L Criange Addition |
| NAME STREET ADDRESS | GREENWELL, STEPHEN S 8350 NW 7TH AVE | | 3.2 NAME 3.3 STREET ADDRESS | | |
| | MIAMI FL | | | | |
| CITY-ST-ZIP TITLE | MINIMITE | DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE | | Change Addition |
| NAME | | | 4. 2 NAME | | CII Ottorigo CII I Dattion |
| STREET ADDRESS | 1 | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY - ST - ZIP | | |
| TITLE | | DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 6 1 TITLE | | Change Addition |
| NAME | | | 1MAM C 3 | | |

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.