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NONPROFIT CORPORATION ANNUAL REPORT:

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 722295 1. Corporation Name

COMMUNITY HABILITATION CENTER, INC.

Principal Place of Busin								
11450	S.W. 79TH ST.							
	FL 33173							

2. Principal Place of Business

Suite, Apt. #, etc.

22

Mailing Address

11450 S.W. 79TH ST. MIAMI FL 33173

2a. Mailing Address

27

Suite, Apt. #, etc.

FILED May 01, 1999 8:00 am secretary of State

05-01-1999 90035 015 ****70.00



Date Incorporated or Qualifed

12/20/1971 4. FEI Number 23-7171039

Pack	City & State		City & State			5. Certificate of Status Desired				
S. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with 2 and soccept the colligations of Sections 617 0502. Florida Statutes, signature, types or prince area of engineering agent. I am familiar with 2 and soccept the colligations of Sections 617 0503. Florida Statutes, signature, types or prince area of engineering agent. I am familiar with 2 and 2 and 617 1508. Florida Statutes, signature, types or prince area of engineering agent. I am familiar with 2 and soccept the colligations of Section 617 0503. Florida Statutes, signature, types or prince area of engineering agent of the purpose of changing its registered agent. I am familiar with 2 and 2 and 2 and 2 and 3 and	:3		28			Gormonio di Giardo Dobii da	Fee	Required		
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name 12. Street Address (P.O. Box Number is Not Acceptable) 13. Name 14. Name 15. Name and Address of New Registered Agent 15. Name and Address of New Registered Agent 16. Name and Address of New Registered Agent 17. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of ortics or registered agent, or both, in the State of Florids. Such change was auditored by the corporation's board of decisions. I hereby accept the exponitionent as registered of ortics or registered agent and the registered agent or both, in the State of Florids. Such change was auditored by the corporation's board of decisions. I hereby accept the exponitionent as registered of the ortics of the professor. I hereby accept the exponitionent as registered agent or both, in the State of Florids. Such change was auditored by the corporation's board of decisions. I hereby accept the exponitionent as registered agent or both, in the State of Florids. Such change was auditored by the corporation's board of decisions. I hereby accept the exponitionent as registered agent or both, in the State of Florids. Such change was auditored by the corporation's board of decisions. I hereby accept the exponitionent as registered agent or both, in the State of Florids. Such change was auditored by the corporation's board of decisions. I hereby accept the exponitionent as registered agent or both, in the State of Florids. Such change was auditored by the corporation's board of decisions. I hereby accept the exponitionent as registered agent or both, in the State of Florids. Such change was auditored by the corporation's board of decisions. I hereby accept the exponition and accept the provision and accept the provision and accept the provision and accept the state of Florids. In the section		Country	Zip	Country		6. Election Campaign Financing	_ໆ \$5.0	May Be		
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DICKSON EILEEN 8201 SW 142 AVE MAMI FL 33183 32 44 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered optics or registered agent, or both, in the State of Florida, Stach change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and going and the state of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and going its registered agent and		9. Name and Address of Current R	egistered Agent			10. Name and Address of New Reg	istered Agent			
B201 SW 142 AVE B3	· · · · · · · · · · · · · · · · · · ·	•		81	Name	•				
B201 SW 142 AVE B3	DICKGON EII EEN			82	Street A	root Address (P.O. Boy Number is Not Accentable)				
MAMI FL 33183 83				"	Jucota	Addiss (F.O. Dox Homber is Not Notespacio)				
Section 17, 1502 and 1871 1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered signal, 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, and accept the obligations of, Section 617.0503, Florida Statutes.				83						
11. Pursuant to the provisions of Sections 517 0502 and 617 1508, Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered office or registered signs, or both, in the State of Florida: Such change was authorized by the corporation's board of directors. I hereby societ the appointment as registered office or registered signs, or both, in the State of Florida: Such change was authorized by the corporation's board of directors. I hereby societ the appointment as registered applications of the Statutes. SIGNATURE	MICHAIL FE	33103					95 7	in Cado		
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Community Comm						·				
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14. 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				6.4 CITY-S	T-ZIP					
Thereby control and minority and the same lead of the same lead officer as if made under noth; that I am an	14. I hereby	certify that the information supplied with	this filing does not qualify for th	ne exempt	on stated	in Section 119.07(3)(i), Florida Statutes. I fu	rther certify that th	ne 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 oath; that I am all 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, with all other like empowered.

EDITHS GHRACURE REQUIRED

Applied For

Not Applicable