FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 7333

(7)

SOMEBODY CARES, INC.

OOMED	ODI OARES, INC.	,											
Principal Place	ddress	***************************************				1 1004)? 12000 1	HAN HIND HAN TAKA	! 80)(0)8 }}	AND BANKE NIDES N	HOLL BURN HORL			
1532 NORTH EAST 62ND STREET 1532 NORTH EAST 62ND STR FORT LAUDERDALE FL 33334 FORT LAUDERDALE FL 33334													
								3. Date Incorporat 07/24/19	75	3a. D	05/01/19	teport 96	
	ace of Business	2a. Mailing Address				4	4. FEI Number Applied For Not Applied For					_	
Suite, Apt.	# elc	26 Suite	Apt. #, etc.			····						ot Applicable Additional	4
22		27				1	5. Certificate of Sta	atus Desired			equired		
City & State	9	City &	State			***		5. Election Campa	ign Financing		\$5.00	May Be	٦
23	· · · · · · · · · · · · · · · · · · ·	28		· · · · · · · · · · · · · · · · · · ·				Trust Fund Conf				to Fees	↲
Ζιρ	Country 25	Zip	Zip Co. 30				6	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					ı
24 25 25 Name and Address of Curre				[30]	101		<u></u>	0. Name and Add					ᅥ
					81	Name			,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
HANSEN				'	82	Street .	Address	(P.O. Box Number	is Not Accepta	ible)			┪
	PRTH EAST 62ND STREET DERDALE FL 33334				B3			····					4
ri. Diul	DENDALE FL 33334				Ш	······································			······································				┙
					84	City				FL	_ 85 Zip	Code	-
11. Pursuant	to the provisions of Sections 617.05 egistered agent, or both, in the Stat	x02 and 617.150	8, Florida Statu	tes, the a	bove	-named	corporat	ion submits this st	atement for the	purpose c	f changing i	ts registered	П
agent. I a	egistered agent, or both, in the statement and accept the obli-	gations of, Section	on 617.0503, F	lorida Stat	lutes	ine corp i.	polations	s board or directors	s. I nereby acce	abrine erbi	JOHRINGER GO	าเคลือยเลด	1
SIGNATURE .						 		····					
12.	Signature, typed or printed name of registered a OFFICERS A	gent and title if applicat ND DIRECTORS		TE: Registere	d Age	ni signatura	e required wh	en reinstating) ADDITIONS/CHA	NGES TO OFF	DATE ICERS AN	D DIRECTO	RS IN 12	┥
TOTLE	SD		DELETE	1,1 Ti	TLE			, , , , , , , , , , , , , , , , , , , ,			Change	Addition	7
NAME	ANDERSON, BOYD			1.2 N	AME								İ
STREET ADDRESS	421 SE 17TH AVE			1.3 \$	TREET.	ADDRESS							
CITY - ST - ZIP	FT. LAUDERDALE FL				ITY-S	T-ZIP							_
TITLE	PD		DELETE	2.1 TI							Change	Addition	1
NAME	HANSEN, JEAN 1532 NORTH EAST 62ND. S	!T		2,2 N			1						
STREET ADDRESS	FT. LAUDERDALE FL) [1		ADDRESS	1						
CITY-ST-ZIP	TO TO		DELETE	3.1 Ti	HTY-S	51 - ZIP	 				Change	Addition	
NAME	RASK, DANIEL		-	3.2 N									
STREET ADDRESS	2727 NE 31ST COURT			3.3 S	TREET	ADDRESS							
CITY-ST-ZIP	LIGHTHOUSE PT FL			3.4. C	ITY-S	T-ZIP	1						
TITLE			DELETE	4,1 TI	TLE		İ				Change	Addition	וו
NAME				4.2 N									
STREET ADDRESS						ADDRESS							ŀ
CITY-ST-ZIP TITLE			DELETE	4.4 C 5.1 Ti	ITY-S	r - ZIP	 				Change	Addition	┨
NAME			Carlotte	5.1 II			1				- Amingo		`
STREET ADDRESS						ADDRESS							
CITY-ST-7IP					ITY-SI								
TITLE			DELETE	6.1 TI			1				Change	Addition	ī
NAME				6.2 N	AME								
STREET ADDRESS				6.3 \$	TREET	ADDRESS							
מול זים עלוים				640	ים ניי	T 715	1						

14. I do 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 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.

4/27/97

954-772-7238

FILED

May 08 1997 8:00am

Secretary of State

SIGNATURE