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Jun 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 758147 (3)
1. Corporation Name
MIAMI PALMETTO DEBATE BOOSTERS, INC.



Principal Place of Business: MIAMI PALMETTO SR. HIGH, 7480 SW 118TH ST., MIAMI FL 33156, US
Mailing Address: 7351 SW 128TH ST, MIAMI FL 33156

3. Date Incorporated or Qualified: 12/10/1981
4. FEI Number: 23-7232224
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business (21-24) and Mailing Address (2a-30) details including Suite, Apt. #, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: MIDENCE, RENAE, PALMETTO MIDDLE SCHOOL, 7351 SW 128TH ST, MIAMI FL 33156

10. Name and Address of New Registered Agent (81-85) details including Name, Street Address, City, State (FL), and 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 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: _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: DP	NAME: STURGESS, NANCIE	1.1 TITLE:	DP
STREET ADDRESS: 5041 SW 105TH ST	CITY-ST-ZIP: MIAMI FL 33156	1.2 NAME:	GRAHAM, CATHY
	<input checked="" type="checkbox"/> DELETE	1.3 STREET ADDRESS:	12175 SW 70th Ct.
TITLE: DP	NAME: MIDENCE, RENAE	1.4 CITY-ST-ZIP:	MIAMI, FL-33156
STREET ADDRESS: 11040 SW 69TH AVE RD	CITY-ST-ZIP: MIAMI FL 33156	2.1 TITLE:	
	<input type="checkbox"/> DELETE	2.2 NAME:	
TITLE: DT	NAME: HORENSTEIN, ANN	2.3 STREET ADDRESS:	
STREET ADDRESS: 8091 SW 144TH ST	CITY-ST-ZIP: MIAMI FL 33158	2.4 CITY-ST-ZIP:	
	<input checked="" type="checkbox"/> DELETE	3.1 TITLE:	DT
TITLE: DS	NAME: KANE, VICKI	3.2 NAME:	SETHI, MEENA
STREET ADDRESS: 12340 TROPICAL WAY	CITY-ST-ZIP: MIAMI FL 33156	3.3 STREET ADDRESS:	13600 SW 102 AVE.
	<input checked="" type="checkbox"/> DELETE	3.4 CITY-ST-ZIP:	MIAMI FL 33176
TITLE:	NAME:	4.1 TITLE:	DS
STREET ADDRESS:	CITY-ST-ZIP:	4.2 NAME:	NATOLI, JENNIFER
	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS:	6351 SW 87 TERRACE
TITLE:	NAME:	4.4 CITY-ST-ZIP:	MIAMI, FL 33143
STREET ADDRESS:	CITY-ST-ZIP:	5.1 TITLE:	
	<input type="checkbox"/> DELETE	5.2 NAME:	
TITLE:	NAME:	5.3 STREET ADDRESS:	
STREET ADDRESS:	CITY-ST-ZIP:	5.4 CITY-ST-ZIP:	
	<input type="checkbox"/> DELETE	6.1 TITLE:	
TITLE:	NAME:	6.2 NAME:	
STREET ADDRESS:	CITY-ST-ZIP:	6.3 STREET ADDRESS:	
	<input type="checkbox"/> DELETE	6.4 CITY-ST-ZIP:	

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 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 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: *Meena Sethi* MEENA SETHI 6/3/98 305.274.4547

CR2E037 (10/97)