

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

93 SEP 12 PM 1:19

NONPROFIT CORPORATION ANNUAL REPORT 1996

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



DOCUMENT # 762203
 1. Corporation Name
 Philippine American Association of South Florida, Inc.

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 800001946648
 -09/13/96--01019--001
 *****13.75 *****13.75
 800001946648
 -09/13/96--01019--002
 *****61.25 *****61.25

Principal Place of Business Mailing Address
 Principal: Dr. Esperanza C. Valencia
 Address 1191 SW 109 Lane
 Davie, FL 33324

3. Date Incorporated or Qualified May 19, 1982
 3a. Date of Last Report Dec. 15, 1995

2. Principal Place of Business (Same)
 21 1191 SW 109 Ln, Davie
 Suite, Apt. #, etc
 22
 City & State Davie, Florida
 23
 Zip 33324 Country Broward
 24
 25
 26 1191 SW 109 Lane
 Davie, FL 33324
 Suite, Apt. #, etc
 27
 City & State Davie, Florida
 28
 Zip 33324 Country Broward
 29
 30

4. FEI Number 59-2674451
 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
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
 Dr. Esperanza C. Valencia
 1191 SW 109 Lane
 Davie, FL 33324

10. Name and Address of New Registered Agent
 81 Name (Same) Dr. Esperanza C. Valencia
 82 Street Address (P.O. Box Number is Not Acceptable) 1191 SW 109 Lane
 83 Broward County
 84 City Davie, FL 85 Zip Code 33324

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: Esperanza C. Valencia, President (1995-1997) 7/2/96

12. OFFICERS AND DIRECTORS

TITLE NAME DELETE
 President: Valencia, Esperanza C., Ph.D.
 STREET ADDRESS 1191 SW 109 Lane
 CITY-ST-ZIP Davie, FL 33324

TITLE NAME DELETE
 Vice Pres: Gordin, Alice M.
 STREET ADDRESS 1200 SE 2nd Ave.
 CITY-ST-ZIP Deerfield Beach, FL 33341

TITLE NAME DELETE
 SD (Secretary): Broido, Pacita
 STREET ADDRESS 9240 NW 24th Ct.
 CITY-ST-ZIP Sunrise, FL 33322

TITLE NAME DELETE
 TD (Actg-Treas): Espejo, Petrita
 STREET ADDRESS 10880 NW 29th Manor
 CITY-ST-ZIP Sunrise, FL 33322

TITLE NAME DELETE
 D (Director) Lim, George T. Jr., MD
 STREET ADDRESS 10098 McNab Road
 CITY-ST-ZIP Tamarac, FL 33321

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

31 TITLE Change Addition
 32 NAME Ranchez, Gerlinda B. (Delete)
 33 STREET ADDRESS 280 Racquet Club Rd. #105
 34 CITY-ST-ZIP Ft. Lauderdale, FL 33326

41 TITLE Change Addition
 42 NAME Eco, Carmelita B. (Delete)
 43 STREET ADDRESS 3121 NW 107 Dr.
 44 CITY-ST-ZIP Sunrise, FL 33351

51 TITLE Change Addition
 52 NAME
 53 STREET ADDRESS
 54 CITY-ST-ZIP

61 TITLE Change Addition
 62 NAME
 63 STREET ADDRESS
 64 CITY-ST-ZIP

dissolution removed removed

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Esperanza C. Valencia, Ph.D. 7-2-96 (954)370-4712
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Esperanza C. Valencia, Ph.D. Pres. Phil Am Assoc of S F

CR2E037 (3/96)

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NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **762203**
 1. Corporation Name
Philippine American Association of South Florida, Inc.

STATE OF FLORIDA
 800001946648
 -09/13/96--01019--001
 *****13.75 *****13.75
 800001946648
 -09/13/96--01019--002
 *****61.25 *****61.25

Principal Place of Business Mailing Address
Principal: Dr. Esperanza C. Valencia
Address 1191 SW 109 Lane
Davie, FL 33324

21	2. Principal Place of Business (Same) 1191 SW 109 Ln, Davie	26	2a. Mailing Address 1191 SW 109 Lane Davie, FL 33324
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State Davie, Florida	28	City & State Davie, Florida
24	Zip 33324	29	Zip 33324
25	Country Broward	30	Country Broward

3.	Date Incorporated or Qualified May 19, 1982	3a.	Date of Last Report Dec. 15, 1995
4.	FEI Number 59-2674451		Applied For Not Applicable
5.	Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required
6.	Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/>		\$5.00 May Be Added to Fees
8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent
Dr. Esperanza C. Valencia
1191 SW 109 Lane
Davie, FL 33324

81	Name (Same) Dr. Esperanza C. Valencia
82	Street Address (P.O. Box Number is Not Acceptable) 1191 SW 109 Lane
83	County Broward County
84	City Davie, FL
85	Zip Code 33324

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 **Esperanza C. Valencia, President (1995-1997) 7/2/96** DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE President: Valencia, Esperanza C., Ph.D.	NAME Valencia, Esperanza C., Ph.D.	3.1 TITLE	
STREET ADDRESS 1191 SW 109 Lane	CITY-STATE-ZIP Davie, FL 33324	3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-STATE-ZIP	
TITLE Vice Pres: Gordin, Alice M.	NAME Gordin, Alice M.	4.1 TITLE	
STREET ADDRESS 1200 SE 2nd Ave.	CITY-STATE-ZIP Deerfield Beach, FL 33441	4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-STATE-ZIP	
TITLE SD (Secretary): Braido, Pacita	NAME Braido, Pacita	5.1 TITLE	
STREET ADDRESS 9240 NW 24th Ct.	CITY-STATE-ZIP Sunrise, FL 33322	5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-STATE-ZIP	
TITLE TD (Actg-Treas): Espejo, Petilita	NAME Espejo, Petilita	6.1 TITLE	
STREET ADDRESS 10880 NW 29th Manor	CITY-STATE-ZIP Sunrise, FL 33322	6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-STATE-ZIP	
TITLE D (Director) Lim, George T. Jr. MD	NAME Lim, George T. Jr. MD		
STREET ADDRESS 10098 McNab Road	CITY-STATE-ZIP Tamarac, FL 33321		

3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	Ranchez, Gerlinda B. (Delete)
3.4 CITY-STATE-ZIP	280 Racquet Club Rd. #105 Ft. Lauderdale, FL 33326
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	Eco, Carmelita B. (Delete)
4.4 CITY-STATE-ZIP	3121 NW 107 Dr. Sunrise, FL 33351
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

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 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Esperanza C. Valencia, Ph.D., Pres., Phil-Am Assn of SF

CR2E037 (3/96)

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