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Feb 09 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 # 762700 (3) Name changed to:
1. Corporation Name NAMI of Miami, Inc.
~~COMMUNITY ALLIANCE FOR THE MENTALLY ILL - AMI OF MIAMI, INC.~~
N/C 12/8/97 (see attached)

Principal Place of Business Mailing Address
5711 S DIXIE HWY MIAMI FL 33143 5711 S DIXIE HWY MIAMI FL 33143

3. Date Incorporated or Qualified 04/01/1982
4. FEI Number 59-2207150 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 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
DIAZ, RACHEL H.
5780 SW 94 PLACE
MIAMI FL 33173

10. Name and Address of New Registered Agent
81 Name Same
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 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 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 Rachel H. Diaz - President 1/28/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DIAZ, RACHEL H.	
STREET ADDRESS	5780 SW 94 PLACE	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MARCUS, JERRY	
STREET ADDRESS	6401 CABALLERO BLVD	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	ROBINSON, JUDY	
STREET ADDRESS	11756 SW 102 ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	KAPLAN, ELLIOT	
STREET ADDRESS	20801 BISCAYNE BLVD.	
CITY-ST-ZIP	AVENTURA FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	DICKMAN, RUTH	
STREET ADDRESS	10935 S.W. 176 ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	KOCH, RACHEL	
STREET ADDRESS	1541 BRICKELL AVE TH 101	
CITY-ST-ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Same
1.3 STREET ADDRESS	Same
1.4 CITY-ST-ZIP	Same
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Same
2.3 STREET ADDRESS	Same
2.4 CITY-ST-ZIP	Same
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Same
3.3 STREET ADDRESS	Same
3.4 CITY-ST-ZIP	Same
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Same
4.3 STREET ADDRESS	Same
4.4 CITY-ST-ZIP	Same
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Same
5.3 STREET ADDRESS	Same
5.4 CITY-ST-ZIP	Same
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Rachel Koch
6.3 STREET ADDRESS	1541 Brickell Ave Th 101
6.4 CITY-ST-ZIP	MIAMI FL

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 in an attachment with my address.
SIGNATURE: Rachel H. Diaz - President 1/28/98 305-665-2540

CR2E037 (10/97)