

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 19, 2005 08:00 AM
Secretary of State

DOCUMENT # 762700

1. Entity Name
NAMI OF MIAMI, INC.



Principal Place of Business
6780 SW 57 AVE
MIAMI, FL 33143

Mailing Address
5711 S DIXIE HWY
MIAMI, FL 33143



01312005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

| | |
|--|-----------------------------------|
| 4. FEI Number 59-2207150 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

ROBINSON, JUDITH
11756 SW 102 STREET
MIAMI, FL 33186

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|----------------|---------------------|
| TITLE | PD |
| NAME | ROBINSON, JUDITH |
| STREET ADDRESS | 11756 SW 102 STREET |
| CITY-ST-ZIP | MIAMI, FL 33186 |

| | |
|----------------|-------------------------|
| TITLE | VP |
| NAME | LEWIS, GARLIN |
| STREET ADDRESS | 600 BILTMORE WAY, #1204 |
| CITY-ST-ZIP | MIAMI, FL 33134 |

| | |
|----------------|-------------------|
| TITLE | TD |
| NAME | ZIMMER, MARK |
| STREET ADDRESS | 9225 SW 68 STREET |
| CITY-ST-ZIP | MIAMI, FL 33173 |

| | |
|----------------|--------------------|
| TITLE | SD |
| NAME | HERNANDEZ, VICTOR |
| STREET ADDRESS | 7101 SW 129 AVE #6 |
| CITY-ST-ZIP | MIAMI, FL 33183 |

| | |
|----------------|--|
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

| | |
|----------------|--|
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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02/19/05-80006-003 70.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark A. Zimmer TREASURER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 14 2005

MARK ZIMMER 305-271-0213

Date

Daytime Phone #