## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # NO4744

1. Corporation Name

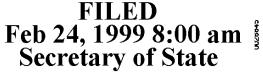
REGIS HOUSE, INC.

Principal Place of Busines
2010 N.W. 7TH STREET
MIAMI FL 33125

US

Mailing Address

2010 N.W. 7TH STREET MIAMI FL 33125



02-24-1999 90075 005 \*\*\*\*61.25



	Place of Business 2a. Mailing Address 26				3. Date Incorporated or Qualifed 08/17/1984			
Suite, Apt.	# etc	Suite, Apt. #, etc.			4. FEI Number	/ Ap	plied For-	
22	n, 0.0.	27			59-2446131	No	t Applicable	
City & State	е	City & State	· · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired  \$8.75 Additional Fee Required			
23   Zip	Country Zip Coul			rv	6. Election Campaign Financing \$5.00 May Be			
24	29 30			•	Trust Fund Contribution Added to Fees			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
				1 Name	· · · · · · · · · · · · · · · · · · ·			
DEDET LEDENIA EDANICISCO S I				CO. Co. Address (D.O. Berryklumber in Net Accomptable)				
PEREZ-LERENA, FRANCISCO S.J.				82 Street Address (P.O. Box Number is Not Acceptable)				
13339 SW 9TH TERR.				3				
MIAMI FL 33184						· 		
``				4 City	. <b>F</b>	85 Zip C	Code	
11 Dureuant	to the provisions of Sections 617 0502	and 617 1508. Florida Statute	es, the abo	ve-named	corporation submits this statement for the purpose	of changing its	registered	
office or n	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was at	uthorizea t	ov the corpo	oration's board of directors. I hereby accept the app	ointment as reg	gistered	
SIGNATURE								
	Stgnature, typed or printed name of registered agent		Registered A	ent signature n	equired when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	
12.	OFFICERS AND	DELETE	1.1 TITU	-	ADDITIONS/OFFICES TO OFFICEROY	Change	Addition	
TITLE	PD STANGED	<del>-</del>	_		•	;		
NAME	PEREZ-LERENA S. J. , FRANCISO	LU	1.2 NAM		·			
STREET ADDRESS				ET ADDRESS	· ·	•		
CITY-ST-ZIP	MIAMI FL	DELETE	1.4 CTTY		<u> </u>	Change	Addition	
TITLE	VD	DELETE	2.1 TTL		TD	Chlange	( Auditori	
NAME	CORTADA, XAVIER		2.2 NAM	_	RUANO, ROBERT J.		* *	
STREET ADDRESS	3621 SW 3RD AVE			ET ADDRESS	9130.S. Dadeland Blvd.	ste.	1400	
CITY-ST-ZIP	MIAMI FL	<del></del>	_	-ST-ZIP	MIAMI, FL	Change	Addition	
TITLE	D	☐ DELETÉ	3.1 ፐቪኒ	i	SD			
NAME	SUAREZ-BURGOS, MARCO A.		3.2 NAM	E	SUAREZ-BURGOS, MARCO I	4 ÷		
STREET ADDRESS	l .		3.3 STRI	ET ADDRESS	200 S.W. 30th ROAD		_ 1	
CITY-ST-ZIP	MIAMI FL		_	-ST-ZIP	MIAMI, FL		Addition	
TITLE	TD	DELETE	4.1 TITL	-	D	☐ Change	Auditon	
NAME	GONZALEZ-LEARRA, FRANCISCO		4. 2 NAM	KE.	ANDUX, MIGUEL SR.			
STREET ADDRESS	1		4.3 STRI	ET ADDRESS	780 N.W. LE JEUNE RD.,	, Ste.	417	
CITY-ST-ZIP	MIAMI FL	<b></b>	4.4 CITY		MIAMI, FL			
TITLE	SD	DELETE	5.1 TITL		D	Change	☐ Addition (	
NAME	ARRUZA, GUILLERMO		5.2 NAM		DEL VALLE, FRANCISCO	. " -	_ [	
STREET ADDRESS	421 AURELIA AVENUE		5.3 STR	EET ADDRESS	2825 Granada Blvd., Ar	)t.# 1-	·A [	
CITY-ST-ZIP	CORAL GABLES FL			-ST-ZIP	CORAL GABLES, FL			
TITLE	D	DELETE	. 6.1 TFΠ_	Ē		Change	☐ Addition	
NAME	SALAZAR, MARIA TERESA		6.2 NAM	E			(	
STREET ADDRESS			6.3 STR	EET ADDRESS				
om ot 70	CORAL GARLES EL		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 preserver 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 any attachment with an address, with all other like empowered.

SIGNATURE:

01-11-99

(305)642 - 7600