## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

DOCUMENT # N40724

(9)

Suite, Apt. #, etc.  22  Suite, Apt. #, etc.  27  Suite, Apt. #, etc.  5. Certificate of Status Desired Fee Required Fee Required  City & State City & State 6. Election Campaign Financing Trust Fund Contribution Status Desired Fee Required Fee Required  \$5,00 May Be Added to Fees  Zip Country Zip Country 8. This corporation has liability for intangible tax ynder s. 199.032,	THE LO	ORD HOU	ise for all, in	C.									
1134 N.W. 2010 N/E P.O. BOX 600550 NA MAIN F. 2010 N.W. 2010 N/E P.O. BOX 600550 NA MAIN F. 2010 N.W. 20	Principal Place	of Business		Mailing Address					( <b>* 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </b>				
2. Principal Place of Business	11434 MW 22ND AVE. P.O. BOX 680580			11334 N.W. 22ND AVI P.O. BOX 680580 NA MIAMI FL 33168	11334 N.W. 22ND AVE. P.O. BOX 680580 NA MIAMI FL 33168								
Surfa, Apt. A. etc.    Surfa, Apt. A. etc.   27   28   27   29   20   20   20   20   20   20   20	**************************************	<b>.</b>		US					10/25/1990				
Suite, Apt. 4, etc.  27 28 27 27 27 28 27 28 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	2. Principal Pla 21	ace of Busine	ess	<b>├</b> ─1 ~						7	<del></del>		
City & State  29 29 20 20 20 20 20 20 20 20 20 20 20 30 30 30 30 30 30 30 30 30 30 30 30 30	Suite, Apt. #, etc.			<b>├</b> ──1	<del> </del> 1				5. Certificate of Status Desired	t t		75 Additional	
20   Country   25   25   28   30   Country   10   Tortick Statutes   10   Name and Address of Current Registered Agent   10   Name and Address of Name   10   Name				—— <sub>1</sub>	<b>├</b> ──₁ `						\$5/	00 May Be	
26   26   30   10   10   10   10   10   10   10			Country										
WILSON, JOHN 11334 N W 22ND AVENUE MIAMI FL 33167  82 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 617,0502 and 617,1506, Florida Statutes, the accept 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, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  TO CFFICERS AND DIFECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12  THE DP DELETE IN THE DOT DELETE IN THE DT DELETE IN THE DELETE IN THE DT DELETE IN THE DELET					30			Florida Statutes 🔲 Yes 🛈 No					
WILSON, JOHN 11334 N W 22ND AVENUE MIAMI FL 33167  B8 City FL 85 C		9, Name	and Address of Curr	ent Registered Agent	Registered Agent						agistered Agent		
11334 N W 22ND AVENUE  MIAMI FL 33167  P4 Orly  FL 85 Zp Code  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florids Statutes, the acover named corporation submits this statement for the purpose of changing the registered office femiliar with, and accept the obligations of, Section 617,0503, Price Statutes, the acover named corporation submits this statement for the purpose of changing the registered office femiliar with, and accept the obligations of, Section 617,0503, Priced Statutes,  SIGNATURE  Spoken, typed or priced raise of registered agent and the f expression  DP						81	Name						
MIAMI FL 33167    FL   State				82 Street Ad			ddres	s (P.O. Box Number is Not Acceptabl	e)				
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Floridis Statutes, the acove named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Floridis. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I arm from framiliar with, and accept the obligations of, Section 617.0503, Floridis Statutes.    Signature													
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Findias Statutios, the acover named corporation submits this statement for the purpose of changing its registered office or registered agenut. To thin, in the State of Findias Such change was suthnived by the corporation's board of directors. I hereby accept the appointment as registered eagent. I arm familiar with, and accept the obligations of. Section 617.0503, Florida Statutes.  SIGNATURE   Separate, typed of printed raise of agreed agent and its a flagible of the purpose of changing its registered office or registered agent. I arm familiar with, and accept the obligations of. Section 617.0503, Florida Statutes.  SIGNATURE   OFFICERS AND DIFECTORS   13.						84	City			EI	85 7	Zip Code	
SIGNATURE   Sign	or register	red agent, or	both, in the State of Fig	orida. Such change was author	ized by the c	ve-r	l named cor oration's b	poratio	on submits this statement for the purpor directors. Thereby accept the appo	nose of ch	anging its	s registered office	
12	familiar wit	th, and acce	pt the obligations of, Se	ection 617.0503, Florida Statuti	es.	•							
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		y certify that	the information supplies	d with this filing is voluntarily fu				fy for t	the exemption stated in Section 119.0	7(3)(k), FJ	ліda Stati	utes. I further	