


FILE NOW: FILING FEE IS \$61.25

FILED
Jan 29 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000005323 (0)
 1. Corporation Name
MINIATURE PINSCHER CLUB OF SOUTH FLORIDA, INC.



Principal Place of Business 11617 NW 35TH CT CORAL SPRINGS FL 33065	Mailing Address 11617 NW 35TH CT CORAL SPRINGS FL 33065-7008
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/27/1994	3a. Date of Last Report 10/15/1996
21	26	4. FEI Number 65-0567860		Applied For Not Applicable	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HARIG, RICHARD L 11617 NW 35TH CT CORAL SPRINGS FL 33065				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARIG, RICHARD L	1.2 NAME	
STREET ADDRESS	11617 NW 35TH CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	1.4 CITY-ST-ZIP	
TITLE	DV <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUTTON, ANN	2.2 NAME	
STREET ADDRESS	13801 STIRLING RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33330	2.4 CITY-ST-ZIP	
TITLE	DS <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARIG, SUE M	3.2 NAME	
STREET ADDRESS	11617 NW 35TH CT	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	3.4 CITY-ST-ZIP	
TITLE	DT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANGELBELLO, ARMANDO	4.2 NAME	
STREET ADDRESS	619 SW 17TH ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33315	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUNN, FRED	5.2 NAME	
STREET ADDRESS	RT 1 BOX 277B	5.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BISTRIM, VERA H	6.2 NAME	
STREET ADDRESS	7770 N.W. 50 ST., PH 510	6.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL FL 33351	6.4 CITY-ST-ZIP	

14. I do 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 on an attachment with an address.

SIGNATURE: **RICHARD L HARIG** *R. Harig* Jan 6, 1997 954-845-4748

CR2E037 (9/96)