SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 N95000004564 **DOCUMENT #**

1. Corporation Name

CRAWFORD CENTER, INC.

Principal Place of Business

2017 NE 25TH ST WILTON MANNORS FL 33305

Mailing Address

3191 CORAL WAY 3RD FLOOR MIAMI FL 33145

FILED Aug 03, 1999 8:00 am Secretary of State

08-03-1999 90006 037 ****70.00



3. Date incorporated or Qualifed

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Suite, Apt. 9, 40c. 22 St.Lt Z Z 2 15 Suite Z 2 15 Suite Z 2 2 15		lace of Business PLJ	2a Mailing Address	Sugar	ice Bl	3. Date Incorporated or Qualifed				
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MENENDEZ, MANUEL 3191 CORAL WAY 3RD FLOOR MAMI FL 33145 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its 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 617.0502, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE D. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE ED. DELETE 1.1 TITLE D. MENENDEZ, MANUEL 1.2 NAME STREET ADDRESS CITY-51-2P MAMI FL 33176 1.4 CITY-51-2P MAMI FL 33176 1.4 CITY-51-2P MAMI FL 33176 1.5 TITLE D. D. DELETE 2. TITLE D. D. DELETE 3. TITLE D. D. DELETE 4. TITLE D. D. DELETE 4. TITLE D. HENNANDEZ, LYNN 3. STREET ADDRESS CITY-51-2P MAMI FL 33176 1. CITY-51-2P MAMI FL 33176 1. CORAL GABLES FL 33134 2. CITY-51-2P MAMI FL 33176 1. CORAL GABLES FL 33134 2. CITY-51-2P MENDROKE PINES FL 33028 3. STREET ADDRESS CITY-51-2P TITLE D. DELETE 4. TITLE D. Change Addition MENDROKE PINES FL 33028 3. STREET ADDRESS CITY-51-2P TITLE D. Change Change Addition Addition TORAL GABLES FL 33134 4. CITY-51-2P Change Addition TORAL GABLES FL 33134 ADDITIONS/CHANGES FL ADDI	24 2 33			301 	<u> </u>		istered A			
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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, the above-named 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, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's particular agent agents	3HD FLOOR									
11. Pursuant to the provisions of Sections 617.6502 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 in am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, Speak or printed name of registered agent and title if applicable. (NOTE: Registered Agent agents when finishating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE ED	MIAMIFL	. 33145		84	City			85 Zip C	ode	
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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 suppliemental 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 of trustee empowered to exact 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 apprecia, with all other like empowered.

SIGNATURE: