

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N95000005167**

1. Corporation Name
Hollywood Colombian American Lions Club

Principal Place of Business Mailing Address
3015 N. OCEAN BLVD. Suite C-117 Fort Lauderdale, FL 33308 **10590 SW 100 STREET MIAMI, FL 33176**

2. Principal Place of Business 2a. Mailing Address
21 **AS ABOVE.** 26 **10590 SW 100 ST.**
Suite, Apt # etc Suite, Apt #, etc
22 City & State 27 **MIAMI, FL 33176**
23 **MIAMI, FL 33176**
24 Zip 25 Country 29 Zip 30 **U.S.A.**

3. Date Incorporated or Qualified **November 1, 1995** 3a. Date of Last Report **Not Applicable**
4. FEI Number Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**Guillermo L. Sierra
3015 N. OCEAN BOULEVARD
Suite C-117
Fort Lauderdale, FL 33308**

10. Name and Address of New Registered Agent
81 Name **JAIINE E. MANTILLA**
82 Street Address (P.O. Box Number is Not Acceptable) **10590 SW. 100 STREET**
83
84 City **MIAMI, FL.** 85 Zip Code **FL 33176**

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 *Jaine Mantilla* **TREASURER** Date **MAY 1, 1996**

12. OFFICERS AND DIRECTORS

TITLE	D	PRESIDENT	<input type="checkbox"/> DELETE
NAME		SIERRA, BLANCA	
STREET ADDRESS		3015 N. OCEAN BLVD. Suite C-117	
CITY-ST-ZIP		Fort Lauderdale, FL 33308	
TITLE	D	Vice President	<input type="checkbox"/> DELETE
NAME		CARRILLO, ANDY	
STREET ADDRESS		3530 MYSTIC POINT DRIVE #2203	
CITY-ST-ZIP		AVENTURA, FL 33180	
TITLE	T	SECRETARY	<input type="checkbox"/> DELETE
NAME		CARRILLO, NOHRA	
STREET ADDRESS		3530 MYSTIC POINT DRIVE #2203	
CITY-ST-ZIP		AVENTURA, FL 33180	
TITLE	D	TREASURER	<input type="checkbox"/> DELETE
NAME		MANTILLA, JAIINE	
STREET ADDRESS		10590 SW 100 STREET	
CITY-ST-ZIP		MIAMI, FL 33176	
TITLE	T	LIONS TOWER	<input type="checkbox"/> DELETE
NAME		BERNSDORFF, JUHA	
STREET ADDRESS		641 SW. 3RD STREET	
CITY-ST-ZIP		HA HAWDALE, FL 33009	
TITLE	T	TAIL TWISTER	<input type="checkbox"/> DELETE
NAME		KANTER, IRVING	
STREET ADDRESS		6155 LA BONCE	
CITY-ST-ZIP		MIAMI BEACH, FL 33140	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 for or on an attachment with an address.

SIGNATURE: *Jaine Mantilla* Date **05-1-96** Telephone # **305-596-6750**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **JAIINE E MANTILLA, TREASURER** **CS 7/2/96**

CR2E037 (12/95)