

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 # N95000005200 (9)

1. Corporation Name

THE INTER-NATIONAL FOUNDATION FOR THE LIVING ART  
S, INC.



Principal Place of Business

Mailing Address

3201 KIRK STREET  
MIAMI FL 33133

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MIAMI FL 33133

3. Date Incorporated or Qualified  
10/30/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 P.O. Box 494

4. FEI Number

65-0660448

Applied For  
Not Applicable

22 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

23 City & State

27 City & State

28 Miami, FL

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

24 Zip Country

29 33233 Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FREMONT, DOUGLAS P  
1221 BRICKELL AVE SUITE 1780  
MIAMI FL 33178

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 officer 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P/T/S/D ☐ DELETE

NAME Darby Hayes  
STREET ADDRESS 3201 Kirk Street  
CITY-ST-ZIP Miami, FL 33133

1.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME Les Baylis  
STREET ADDRESS 13305 SW 109 Place  
CITY-ST-ZIP Miami, FL 33176

2.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME Martin Holtz  
STREET ADDRESS 15975 SW 78th Place  
CITY-ST-ZIP Miami, FL 33157

2.2 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.2 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.3 TITLE ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
5.5 CITY-ST-ZIP  
5.6 CITY-ST-ZIP

500001838205  
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☐ Change ☐ Addition

5/23

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, or on an attachment with an address.

SIGNATURE: Darby Hayes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96 305/858-8552

Date

Daytime Phone #

CR2E037 (12/95)