

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Apr 13, 1999 8:00 am**  
**Secretary of State**

04-13-1999 90041 022 \*\*\*\*61.25

0031065

NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
---	---	--

**DOCUMENT # N97000003588**

1. Corporation Name  
**ASSOCIATION OF RETIRED AND DISABLED PERSONS, INC**  
 Association of retired and disabled Persons Inc

Principal Place of Business 3031 N.W. 19TH AVENUE #506 MIAMI FL 33142	Mailing Address 3031 N.W. 19TH AVENUE #506 MIAMI FL 33142
--	--



2. Principal Place of Business 21 3031 NW 19th Ave S/506	2a. Mailing Address 26 P.O. box 420158	3. Date Incorporated or Qualified 06/20/1997
Suite, Apt. #, etc. 22 506	Suite, Apt. #, etc. 27	4. FEI Number APPLIED FOR <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City & State 23 Miami Florida	City & State 28 Miami Florida	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24 33142	Country 25 Miami Dade	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MILIAN, JUAN A 3031 N.W. 19TH AVENUE #506 MIAMI FL 33142		81 Name Milian Juan A	85 Zip Code 33142
		82 Street Address (P.O. Box Number is Not Acceptable) 3031 N.W. 19 Avenue	
		83 # 506	
		84 City Miami	FL

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 \_\_\_\_\_ DATE April-10-1999

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILIAN, JUAN A 3031 N.W. 19TH AVE #506 MIAMI FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D Milian Juan A 3031 N.W 19Th Avenue #506 Miami FL.33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAMBAS, MARIO 12640 SW 18 ST MIAMI FL 33175	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	D Cambas Mario 12640 SW.18 St Miami FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEATO, LEO 7381 SW 109 PATH MIAMI FL 33173	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	D Beato Leo 7381 SW 109 Path Miami FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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, with all other like empowered.

SIGNATURE: \_\_\_\_\_ SIGNATURE REQUIRED \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037-01/198