

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # N93000001742 (6)

1. Corporation Name

SPOUSES AGAINST LAWYER ABUSE, INC.

55 JAN 23 AM 9:11

Principal Place of Business

Mailing Address

7436 S.W. 117TH AVE.  
SUITE 219  
MIAMI FL 33183

7436 S.W. 117TH AVE.  
SUITE 219  
MIAMI FL 33183

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

04/19/1993

03/10/1994

4. FEI Number

85-0503-905

Applied For

APPLIED FOR

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 7436 SW 117 AVE.

26 7436 SW 117 AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 219

27 # 219

City & State

City & State

23 MIAMI, FL

28 MIAMI, FL

Zip

Country

Zip

Country

24 33183

25 USA

29 33183

30 USA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Nonprofit with IRS 501(c)(3)  
Tax Exempt Status

☒

\$68.75 Supplemental  
Fee Not Required

8. This corporation has liability for intangible tax under S. 189.032,  
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DALMAU, RICHARD M  
7436 S.W. 117TH AVE.  
SUITE 219  
MIAMI FL 33183

81 Name

DALMAU, RICHARD M.

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

7436 S.W. 117 AVE.

83

SUITE 219

84 City

MIAMI

FL

85 Zip Code

33183

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

*R. Dalmau*  
Signature, typed or printed name of registered agent and use if applicable.

*RICHARD M. DALMAU PRESIDENT*  
(NOTE: Registered Agent signature required when reappointing)

*JAN. 20, 95*  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSTD  
NAME DALMAU, RICHARD M  
STREET ADDRESS 7436 S.W. 117TH AVE., SUITE 209  
CITY-ST-ZIP MIAMI FL 33183

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

*PSTD*  
*DALMAU, RICHARD M.*  
*7436 SW 117 AVE., SUITE 219*  
*MIAMI, FL. 33183*  
☒ Change ☐ Addition

TITLE D  
NAME HENDRICK, JANE E  
STREET ADDRESS 3191 CORAL WAY  
CITY-ST-ZIP MIAMI FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME DALMAU, MARIA  
STREET ADDRESS 11331 SW 63 TERR.  
CITY-ST-ZIP MIAMI FL

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME BERTRAND, BOB  
STREET ADDRESS 8 EAST 13 STREET  
CITY-ST-ZIP HIALEAH FL

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 this 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:

*R. Dalmau*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*RICHARD M. DALMAU*

Date

*JAN. 20, 95*

Signature #

*305-596-9422*

0000071