## 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 # N95000002294 (5)

PHOENIX RISING FOUNDATION, INC.

Principal Place of Business Mailing Address  1533 ALTON DOAD					
1521 ALTON ROAD SUITE 65 MIAMI BEACH FL 33139		1521 ALTON ROAD SUITE 65			
MIAMI DEAU	1 FE 33138	MIAMI BEACH FL 33	139	3. Date incorporated or Qualified 3a 05/11/1995	Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		4 FEI Number	Applied For
21		26		65-0664981	Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		27		XX	Fee Required
23	•	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
Zip	Country	Zip	Country	Trust rand Continuation —	Added to Fees
4	25	29	30	This corporation has liability for intanglib     Florida Statutes	
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Register	<b>3</b> -4 ·
1051 WE	ez, Richard IST 29TH Street I FL 33139			ONZALEZ RICHARD ress (P.O. Box Number is Not Acceptable) 20 Lincoln Road Sui	t e 335
familiar wit	o the provisions of Sections 617.0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Section Section 1.00 per section of the se	on 617.0503, Florida Statut	utes, the above-named corporation's boates.	ration submits this statement for the purpose of ord of directors. I hereby accept the appointmen	changing its registered office tas registered agent. I am
12.	OFFICERS AND		NOTE: Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 19
TITLE	PD	DELETE	1.1 TITLE	ADDITIONS/OFFICERS A	AND DIRECTORS IN 12 Change Addition
NAME	KURITZKY, MARK	_	1.2 NAME		
STREET ADDRESS	1030 16H ST. #3		1.3 STREET ADDRESS		2
CITY-ST-ZIP	MIAMI BEACH FL 33139		1.4 CITY - \$1 - 2IP		L C
TITLE	VD	DELETE	2.1 TITLE		K Change Addition
NAME	MOSES, JIM		22 NAME	MOSES, JIM	
STREET ADDRESS	1061 EUCLID AVE. #205		2.3 STREET ADDRESS	1535 Michigan Avenue	# 7
CITY-ST-ZIP	MIAMI BEACH FL 33139		2 4 CITY-ST-ZIP	Miami Beach, Fl 3313	
TITLE	VD	DELETE	3.1 TITLE		<b>K</b> Change ☐ Addition
NAME	JUBRAN, JACK		3.2 NAME	JUBRAN, JACK	
STREET ADDRESS	1061 EUCLID AVE. #205		3.3 STREET ADDRESS	899 West Avenue PH-	т.
CITY-ST-ZIP	MIAMI BEACH FL 33139	·		Miami Beach, Fl 3313	- }
TITLE	VD	DELETE	4.1 T(TLE	•	☐ Change ☐ Addition
NAME	Kashe, Christopher	/		ce President	41
STREET ADDRESS	1061 EUCLID AVE. #205		4.3 STREET ADDRESS	MARRERO, CARLOS	
CITY-ST-ZIP	MIAMI BEACH FL 33139		4.4 CITY-ST-ZIP	161 N.E. 89th Street	Miami, FL3313
TITLE	VD	DELETE	5 1 TITLE		Change Addition
NAME	WOYEVODSKY, ANDREW		5.2 NAME	WOYEVODSKY, ANDREW	
STREET ADDRESS	1061 EUCLID AVE. #205		5.3 STREET ADDRESS	1697 32nd Street #10	
CITY-ST-ZIP	MIAMI BEACH FL 33139		5.4 CITY-ST-ZIP	Washington, DC 20007	
TITLE	STD	DELETE	61 TITLE	STD/C	Change Addition
NAME	BONDY, DARREN		6.2 NAME	BONDY, DARREN	
STREET ADDRESS	1061 EUCLID AVE. #205		6.3 STREET ADDRESS	1061 Michigan Avenue	#2
CITY-ST-ZIP	MIAMI BEACH FL 33139		6.4 CITY-ST-ZIP	Miami leach El 2212	g" -
14. I do hereby	certify that the information supplied w	ith this filing is voluntarily fu	rnished and does not qualify f	Miami 3each F1 3313 or the exemption stated in Section 119.07(3)(k),	Florida Statutes. I further
oath; that I		ation or the receiver or trust	inual report is true and accura lee empowered to execute thi	the and that my signature shall have the same least report as required by Chapter 617, Florida Sta	
SIGNAT	URE:	W BUNGS	CER OR DIRECTOR	05/06/96 30	5-882-8731