FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F11032

(2)

OUR LADY OF THE ROSARY SCHOOL, INC.

Principal Place of Business Mailing Address							iidi Albii Asbi	T WIND I WIND IN INCHES	HIRIE IMM
10701 SW 95	The state of the s		9768 SW 94 TERRACE						
MIAMI FL 3317	76	MIAMI FL 33176 US	-1858						
						3. Date Incorporated or Qualified 12/08/1980		Date of Last R 1/24/1996	eport
2. Principal P	lace of Business	2a. Mailing Add	ress			4. FEI Number		· · · · · · · · · · · · · · · · · · ·	optied For
21		26				59-2074432			ot Applicable
Suite, Apt		Suite, Apt 4				5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State	0	City & State				6. Election Campaign Financing		\$5.00	•
23 Zip	Country	28	Zip Country			Trust Fund Contribution Added to Fees 8. This corporation has liability for intengible tax under s. 199.032,			
24	25 29 30		├	າ ້		Florida Statutes Yes No			
	9. Name and Address of Curre		1001	T		10. Name and Address of New			
SIR	ven, martha r			81	Name			, , , , , , , , , , , , , , , , , , , 	
9768 SW 94 TERRACE Miami Fl 33176					Street Addre	ldress (P.O. Box Number is Not Acceptable)			
				83					
				84	City		FI	85 Zip (Code
11. Pursuant I office or re agent I ar	to the provisions of Sections 607.05 egistered agent or both, in the Stat m familiar with, and accept the obli	02 and 607.1508, Flor e of Florida. Such cha gations of, Section 607	ida Statutes, the a nge was authorize '.0505, Florida Sta	bove d by	e-named corporation	oration submits this statement for the on's board of directors. I hereby acc		of changing it pointment as	s registered registered
SIGNATURE	Signature, typical or printed name of registered a					ed when reinstaling)		N 81 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
12.		ND DIRECTORS	13.		in signatura raquire	ADDITIONS/CHANGES TO OF	DATE.	ID DIRECTOR	S IN 12
TITLE	P		ELETE 1.1 T			NODITIONO OF INTIGEO TO OF	TOLITO AIT	Change	Addition
NAME	sirven, martha r.		1.2 N	IAME				_ •	
STREET ADDRESS	9768 SW 94 TERRACE		1.3 \$	TREET	ADDRESS				
CITY - ST - ZIP	MIAMI FL		1.4 0	ITY S	T-ZIP				
TITLE	ST		ELETE 2.1 T	ITLE				Change	☐ Addition
NAME	SIRVEN, JOSE L.		2.2 N	IAME	1				
STREET ADDRESS	9768 SW 94 TERRACE MIAMI FL		2.3 S	TREET	ADDRESS				
City - St - ZiP	MISMI TL			CITY - S	ST-ZIP				
TITLE		L) L						L Change	Addition
NAME STREET ADDRESS			3.2 M		ADDRESS				
CITY-ST-ZIP			1	STREET CATY-S		•			
TITLE	The second section of the second seco		3.4. T ELETE 4.1 T		or - cur		····	Change	Addition
NAME			ı	NAME					
STREET ADDRESS			4.3 9	TREET	ADDRESS				
C/TY+ST-ZIP			1	aty-s					
TITLE			ELETE 5.1 T					Change	Addition
NAME			5.2 N	IAME					
STREET ADDRESS			5.3 S	TREET	ADDRESS	•		•	
C(TY-ST-ZIP				HTY-S	T - ZiP				
TITLE		[] [ELETE 6.11	ITLE				Change	Addition
NAME			6.2 N	IAME	Į				
STREET ADDRESS			6.3 S	TAEET	ADDRESS				

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

(30s) 271·83.89

FILED

Feb 05 1997 8:00am

Secretary of State

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