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Feb 05 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 757006 (2)

1. Corporation Name

THE GREATER MIAMI SOCIETY FOR HUMAN RESOURCE MAN
AGEMENT, INC.

Principal Place of Business

Mailing Address

200 S. BISCAYNE BLVD.
5300 SOUTHEAST FINANCIAL CENTER
MIAMI FL 33131-2339

200 S. BISCAYNE BLVD.
5300 SOUTHEAST FINANCIAL CENTER
MIAMI FL 33131-2310



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

3. Date Incorporated or Qualified
02/17/1981

3a. Date of Last Report
03/21/1996

4. FEI Number
65-0231220

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

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

ZELEK, MARK E.
200 S. BISCAYNE BLVD.
5300 S.E. FINANCIAL CENTER
MIAMI FL 33131-2339

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 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	WYSONG, LIZ	
STREET ADDRESS	16400 NW 32 AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	P	DELETE
NAME	KRESSEL, ROBERTA	
STREET ADDRESS	777 BRICKELL AVE.	
CITY-ST-ZIP	MIAMI FL	
TITLE	S	DELETE
NAME	CAPALDO, LYNN	
STREET ADDRESS	3750 NW 87TH AVE., SUITE 300	
CITY-ST-ZIP	MIAMI FL	
TITLE	T	DELETE
NAME	NORRIS, RONALD	
STREET ADDRESS	12805 NW 42 AVENUE	
CITY-ST-ZIP	OPS-LOCKA FL	
TITLE	D	DELETE
NAME	FLYNN, CAROL	
STREET ADDRESS	1118 NW 159 DRIVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	DELETE
NAME	HERR, MELINDA	
STREET ADDRESS	14425 SW 92 COURT	
CITY-ST-ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DIRECTOR	Change	Addition
1.2 NAME	MARGUILES, LYNN		
1.3 STREET ADDRESS	ONE S.E. 3 AVE		
1.4 CITY-ST-ZIP	MIAMI, FL 33131		
2.1 TITLE	DIRECTOR	Change	Addition
2.2 NAME	STINSON, SUSAN		
2.3 STREET ADDRESS	1010 WREN AVE		
2.4 CITY-ST-ZIP	MIAMI SPRINGS, FL 33166		
3.1 TITLE	DIRECTOR	Change	Addition
3.2 NAME	CASTILLO-FRICK, ILIANA		
3.3 STREET ADDRESS	701 BRICKELL AVE.		
3.4 CITY-ST-ZIP	MIAMI, FL 33131		
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE	PRESIDENT-ELECT	Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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

SIGNATURE:

Ronald D. Norris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 1/8/97 (305) 688-3571
Daytime Phone # 0026538

CP2E037 (9/96)