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May 14 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 # N40594 (6)

1. Corporation Name

GREEK ISLANDS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% ODYSSEY RESTAURANT  
6289 W SUNRISE BLVD  
SUNRISE FL 33313  
US

PO BOX 39804  
P. O. BOX 39804  
FT LAUDERDALE FL 33339-9804  
US

3. Date Incorporated or Qualified  
10/30/1990

3a. Date of Last Report  
04/25/1996

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

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25

29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GOUZE, PHILIP J.  
1215 S.E. SECOND AVE  
SUITE 201  
FT LAUDERDALE FL 33316

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PD  
PASSAKOS, SPIROS  
STREET ADDRESS 4001 NW 36TH TERR  
CITY-ST-ZIP LAUDERDALE LAKES FL

TITLE ☐ DELETE

NAME VD  
APOSTILOS, VELISARIOS  
STREET ADDRESS 13111 MUSTANG TRAIL  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☒ DELETE

NAME TD  
KEHAGIAS, DIMITRIOS  
STREET ADDRESS 6289 W. SUNRISE BLVD.  
CITY-ST-ZIP SUNRISE FL

TITLE ☐ DELETE

NAME SD  
TSANTANIS, SOTERIA  
STREET ADDRESS 2228 S.E. 10TH ST.  
CITY-ST-ZIP POMPANO BEACH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME Second VD  
ELIZABETH FLIAKOS

2.3 STREET ADDRESS 4701 N. Federal Highway

2.4 CITY-ST-ZIP Fort Lauderdale, FL 33301

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME TD  
JOYCE MAOUNIS

3.3 STREET ADDRESS 5280 N.E. Fourth Terrace

3.4 CITY-ST-ZIP Fort Lauderdale, FL 33334

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ 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:

*Soteria Tsantanis* 4/30/97 (954) 463-2995

CR2E037 (9/96)