

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 09, 2006 8:00 am**  
**Secretary of State**

03-09-2006 90163 009 \*\*\*\*61.25

**DOCUMENT # 703972**

1. Entity Name

MIAMI FIRE FIGHTER'S RELIEF FUND, INC.



Principal Place of Business

2980 N.W. SOUTH RIVER DRIVE  
MIAMI FL 33125

Mailing Address

2980 N.W. SOUTH RIVER DRIVE  
MIAMI FL 33125

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1085099

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GALERA, CARLOS  
2980 N.W. SOUTH RIVER DRIVE  
MIAMI FL 33125

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME BARRETO, FIDEL  
STREET ADDRESS 8860 SW 153 TER  
CITY-ST-ZIP MIAMI FL 33157

TITLE D ☐ Delete  
NAME FLORES, TOM  
STREET ADDRESS 12320 SW 100 AVE  
CITY-ST-ZIP MIAMI FL 33176

TITLE D ☐ Delete  
NAME HARRISON, JAMES  
STREET ADDRESS 2607 COOLIDGE ST  
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE P ☐ Delete  
NAME PICCIANO, DALE  
STREET ADDRESS 538 ZAMORA AVE  
CITY-ST-ZIP CORAL GABLES FL

TITLE D ☐ Delete  
NAME WILLIG, STUART  
STREET ADDRESS 10225 SW 135 ST  
CITY-ST-ZIP MIAMI FL 33176

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Carlos Galera*

2/24/06

305-633-3994