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FILED

May 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 704569 (3)

1. Corporation Name

MIAMI LITHUANIAN AMERICAN CITIZENS, INC.



Principal Place of Business

Mailing Address

9655 N W 34TH ST
MIAMI FL 331423655 N W 34TH ST
MIAMI FL 33142-49113. Date Incorporated or Qualified
09/25/19623a. Date of Last Report
01/29/19964. FEI Number
59-1038003Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

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

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PAUTIENIS, BIRUTE
1770 SE 21ST. AVE.
POMPANO BEACH FL 33062

81 Name BERNADETA PAULAITIS

82 Street Address (P.O. Box Number is Not Acceptable)
1511 N E 160 ST.

83

84 City N. Miami Bch. FL 85 Zip Code 33162

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 617.0508, Florida Statutes.

SIGNATURE

B. Paulaitis

April 28, 1997

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 D ☐ DELETE
NAME AUSHRA, JOHN
STREET ADDRESS 220 COLLINS AVE. APT. 9A
CITY-ST-ZIP MIAMI BEACH FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP TPTITLE TD ☒ DELETE
NAME PAUTIENIS, BIRUTE
STREET ADDRESS 1770 SE 21ST AVE.
CITY-ST-ZIP POMPANO BEACH FL 330622.1 TITLE ☐ Change ☐ Addition
2.2 NAME VALERITA JOKSAS
2.3 STREET ADDRESS 380 N.W. 190 ST.
2.4 CITY-ST-ZIP MIAMI, FL.TITLE P ☒ DELETE
NAME STONGVILA, IRENA
STREET ADDRESS 730 DAVIS RD
CITY-ST-ZIP CORAL GABLES FL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME P BERNADETA
3.3 STREET ADDRESS PAULAITIS
3.4 CITY-ST-ZIP 1511 NE 160 ST. FL. 33162
N. MIAMI Bch. FL.TITLE S ☐ DELETE
NAME JUODIKIENE, ONA
STREET ADDRESS 1050 93 ST APT 6-A
CITY-ST-ZIP BAY HARBOR ISLAND FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME MOCKUS, ANTANAS
STREET ADDRESS 9861 SW 60 ST
CITY-ST-ZIP SURFSIDE FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME RADVILAS, STEFA
STREET ADDRESS 8826 ABBOTT
CITY-ST-ZIP SURFSIDE FL 331546.1 TITLE ☐ Change ☐ Addition
6.2 NAME D. LINDA TAYLOR
6.3 STREET ADDRESS 2700 N. 3 1/4 AV.
6.4 CITY-ST-ZIP HOLLYWOOD, FL. 33021

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: B. Paulaitis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 28, 1997

Date

Daytime Phone # 0000000

CP2E037 (9/96)