

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

FILED
May 14 1997 8:00am
Secretary of State

NON-PROFIT CORPORATION ANNUAL REPORT 1997
FLORIDA DEPARTMENT OF STATE
Sandra B. Northam Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # 713622
1. Corporation Name
The Optimist Club of Miramar, Inc.

Principal Place of Business Mailing Address same
6040 SW 23 Street
Miramar, FL 33023

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 6040 SW 23 St.		26 same		11-14-67		2-8-96	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
23 City & State		28 City & State		59-6207991		Not Applicable	
24 33023		29 same		5. Certificate of Status Desired		8.75 Additional Fee Required	
25 Broward		30 same		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
26 same		31 same		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		Yes No	

8. Name and Address of Current Registered Agent
Angel Arroyo
19122 NW 12 Ct.
Pembroke Pines, FL 33029

10. Name and Address of New Registered Agent
81 Name Janine Jerrel
82 Street Address (P.O. Box Number is Not Acceptable) 2041 SW 67 Ave.
83
84 City Miramar FL 85 Zip Code 33023

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.
SIGNATURE Janine Jerrel Janine Jerrel 4-30-97
Signature typed or printed name of registered agent and title (applicable) (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS

TITLE	Director	<input type="checkbox"/> DELETE
NAME	delmi montanez	
STREET ADDRESS	7667 Tropicana	
CITY-ST-ZIP	Miramar, FL 33023	
TITLE	President	<input type="checkbox"/> DELETE
NAME	Angel Arroyo	
STREET ADDRESS	19122 NW 12 Ct.	
CITY-ST-ZIP	Pembroke Pines, FL 33029	
TITLE	Director	<input type="checkbox"/> DELETE
NAME	dorge Alonso	
STREET ADDRESS	7729 Grandview Blvd	
CITY-ST-ZIP	Miramar, FL 33023	
TITLE	Director	<input checked="" type="checkbox"/> DELETE
NAME	Ron Beasley	
STREET ADDRESS	2330 Jamaica Dr.	
CITY-ST-ZIP	Miramar, FL 33023	
TITLE	Director	<input type="checkbox"/> DELETE
NAME	mark Jerrel	
STREET ADDRESS	2041 SW 67 Ave	
CITY-ST-ZIP	Miramar, FL 33023	
TITLE	Secretary	<input type="checkbox"/> DELETE
NAME	Janine Jerrel	
STREET ADDRESS	2041 SW 67 Ave	
CITY-ST-ZIP	Miramar, FL 33023	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	Fast President/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Juan Vera
3.3 STREET ADDRESS	5240 NW 196 Ter.
3.4 CITY-ST-ZIP	Miami, FL 33055
4.1 TITLE	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Tammy Vera
4.3 STREET ADDRESS	5240 NW 196 Ter.
4.4 CITY-ST-ZIP	Miami, FL 33055
5.1 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.
SIGNATURE: Janine Jerrel Janine Jerrel 4/30/97 463-6271 (254)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)