NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 729522

21 1500 NW NORTH RIVER DRIVE

1. Corporation Name

MAHI TEMPLE SOUTH FLORIDA FAIR ASS'N., INC.

Principal Place of Business P O BOX 351087 P. O BOX 350868 MIAMI FL 33135-1087

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

P O BOX 351087 P. O BOX 350868 MIAMI FL 33135-1087

2a. Mailing Address

Suite, Apt. #, etc.

PO BOX 351087

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90063 045 ****61.25



Applied For

Not Applicable

3. Date Incorporated or Qualifed 04/26/1974

FEI Number

59-1577568

22		27			59-15/7508	. Not	Applicable
City & State	the state of the s			087 5. Certificate of Status Desired		\$8.75 A Fee Re	
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00	May Re
72111	25 USA	29 33135-7087 30	1		Trust Fund Contribution	Added to	•
24 33123	9. Name and Address of Current I	120	1		10. Name and Address of New Register		
	3. Name and Address of Current	registered Agoin	81	Name			
	ER, ROBERT J.		82	Street A	Address (P.O. Box Number is Not Acceptable)		
	NORTH RIVER DRIVE		83				
MIAMI FL :	33125		"				
			84	City		85 Zip C	ode
	The state of the s		لباب	<u> </u>			rogistored
office or re	to the provisions of Sections \$17,0902 egistered agent, or both, in the State of m familiar with, and accept the obligation of the state of the section of the state of the st	Florida. Such change was authons of, Section 617.0503, Florida	Statutes.	tne corpo	corporation submits this statement for the purpose tration's board of directors. I hereby accept the ap	bonimient as ref	pistered
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	R\$ IN 12
TITLE	P	DELETE	1.1 TITLE		P	Change	☐ Addition
NAME	SIEGEL, ALVIN I				RICHARD E. LYNN	•	
STREET ADDRESS	ATTOR CIVIL OF ALITY		1.3 STREET ADDRESS 62		6250 sw 117 terr		
CITY-ST-ZIP	MIAMI FL 33157		1.4 CITY-S		MIAMI FL 33156	•	
TITLE	S	DELETE	2.1 TITLE	1-21	9	Change	☐ Addition
	ALEXANDER, ROBERT J		22 NAME		The state of the s		
NAME	1480 NW NORTH RIVER DR			ADDRESS	ALEXANDER, ROBERT J		
STREET ADDRESS					1480 NW NORTH RIVER-DRIVE MIAMI FL 33125		
CITY-ST-ZIP	MIAMI FL 33125	☐ DELETE	2.4 CITY-S 3.1 TITLE	11-21	Т	☐ Change	Addition
TITLE	HITCH OFORCE	_ DELETE	-		MITCH, GEORGE		
NAME	MITCH, GEORGE	•	3.2 NAME		8905 SW75TH ST		
STREET ADDRESS	****			TADDRESS	MIAMI FL 33173		
CITY-ST-ZIP	MIAMI FL 33173		3.4. CITY-S	T-ZIP		Change	Addition
TITLE	D	☐ DELETE	4.1 TITLE		D I VNN DICHARD E	Change	
NAME	21111, 1001, 110		4.2 NAME		LYNN, RICHARD E 6250 SW 117 TERR		
STREET ADDRESS					DAVIE FL 33330		
CITY-ST-ZIP	MIAMI FL 33156		4.4 CITY-S	T-ZIP			\
TITLE	D	☐ DELETE	5.1 TITLE]	D OLCEN MILTION	Change	Addition
NAME	SHURETTE, JOSEPH		5.2 NAME	1	OLSEN, MILTON		
STREET ADDRESS	2721 SW 117TH AVE		5.3 STREET	TADDRESS	3924 NW 20TH AVE FT LAUDERDALE FL 33309		
CITY-ST-ZIP	DAVIE FL 33330		5.4 CITY-S	T-ZIP			
TITLE	D	☐ DELETE 6.1			D	Change	Addition
NAME	OLSEN, MILTON		6.2 NAME		ROBERT R. MILLER		
	2004 204 2071 215		6.3 STREET	TADDRESS	5512 ROOSEVELT STREET		
STREET ADDRESS	I JOZA INN ZULIT AVE						
STREET ADDRESS CITY-ST-ZIP	FT LAUDERDALE FL 33309		6.4 CITY-S	T-ZIP	HOLLYWOOD FL 33121		

officer or director of the <u>corporation</u> 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, with all other like empowered.

SIGNATURE