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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 730344

1. Corporation Name

ASSOCIATION OF X-RAYS TECHNICIANS IN EXILE, INC.

Principal Place of Business

450 NW 32 CT
MIAMI FL 33125
US

Mailing Address

450 NW 32 CT
MIAMI FL 33125
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

07/31/1974

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TAVEL, MARIO A., R.T.
450 NORTHWEST 32ND COURT
MIAMI FL 33125

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 PD ☐ DELETE

NAME MUNIZ, OLIMPIA
STREET ADDRESS 7365 SW 38TH COURT
CITY-ST-ZIP MIAMI FL

TITLE VD ☐ DELETE

NAME NICOLAS, FERNANDEZ
STREET ADDRESS 6715 SW 28TH STREET
CITY-ST-ZIP MIAMI FL

TITLE TD ☐ DELETE

NAME GELPI, ORLANDO
STREET ADDRESS 461 NW 32ND COURT
CITY-ST-ZIP MIAMI FL

TITLE VD ☐ DELETE

NAME VAZQUEZ, MINERVA
STREET ADDRESS 121 W 31ST STREET
CITY-ST-ZIP HIALEAH FL

TITLE SD ☐ DELETE

NAME TAVEL, MARIO A.
STREET ADDRESS 450 NW 32ND COURT
CITY-ST-ZIP MIAMI FL

TITLE VD ☐ DELETE

NAME DELGADO, CARLOS
STREET ADDRESS 1137 SW 4TH STREET #1
CITY-ST-ZIP MIAMI FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 649-2339

CR2E037 (1/98)