

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 737901

SPIRITUAL ASSEMBLY OF THE BAHA'IS OF CENTRAL DAD E COUNTY, INC.

Principal Place of Business									
9300 SOUTH DIXIE HWY.									
209 MIAMI FL 33156									

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

US

22

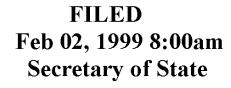
Mailing Address P O BOX 560554 MIAMI FL 33256-0554

2a. Mailing Address

City & State

28

Suite, Apt. #, etc.



02-02-1999 90006 015 ****61.25

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Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

01/31/1977

65-0196354

FEI Number

¬ ~~		29	30			Trust Fund Contribu		Added to	rees	
4	25			T -		10. Name and Address	of New Registered A	Agent		
9. Name and Address of Current Registered Agent				81	Name			* * to , * * *	•	
ROTH MARTING SECRET OF THE BASE IS DE CARRES LOS					82 Street Address (P.O. Box Number is Not Acceptable)					
C/O 9300 S DIXIE HWY					<u> </u>					
			83	83						
SUITE 209		•			014	 		85 Zip C	ode	
MIAMI FL 3				84	City		FL	10 1 20 1 850	i medici i Set	
Longia diregger di	Jan + 647	617.0502 and 617.1508, Florida	Statutes the	above	-named co	proporation submits this statem	ent for the purpose of	changing its ³ r	egistered	
11. Pursuant t	o the provisions of Sections (617.0502 and 617.1508, Florida e State of Florida. Such change e obligations of Section 617.05	e was authoriz	ed by	the corpora	ation's board of directors: I he	reby accept the appoir	ntment as reg	stered	
office or re	n familiar with, and accept the	e obligations of Section 617.05	503, Florida Si	atutes		18,. 2 3 7	12.4 . 4.11 12 3 4 210			
1.5%	3						DATE		·	
SIGNATURE	Signature, typed or printed name of regi-	stered agent and title if applicable.			t signature req	uired when reinstating)	ES TO OFFICERS AN	D DIRECTO	RS IN 12	
12.	OFFIC	ERS AND DIRECTORS		3.			ES TO OFFICERS AN	Change	Addition	
TITLE	SD	☐ DEI	LETE 1.	TITLE		4 31 18-3		T Amenide		
1	PICARRETO, PAULETTE		1.3	2 NAME	1					
NAME		•	I. _{1.}	3 STREE	ADDRESS					
STREET ADDRESS	10800 SW 126 AVE			4 CITY-S	1		× .			
CITY-ST-ZIP	MIAMI FL 33186	□DE		1 TITLE	1-24-			Change	Addition	
TITLE	D	UE			. 1	•				
NAME	PICCARRETO, ALDO		_	2 NAME		•			. 1	
STREET ADDRESS	10800 SW 126 AVE		2	3 STREE	TADDRESS				ļ	
	MIAMI FL 33186		2	4 CITY-5	T-ZIP			Change	Addition	
CITY-ST-ZIP	VD	□ DE	LETE 3	1 TITLE	1			Change		
	, · ·	* ******		2 NAME	·			•		
	VOJDANI, BIJAN	了。 到此 人是不是一种。		_	TADDRESS			, , ,		
STREET ADDRESS	10560 SW 129TH CT	•	- 1						. <u> </u>	
CITY-ST-ZIP	MIAMI FL			4. CITY-	51-ZIF			Change	Addition	
TITLE AND PIL	3TD5€	∐ DE	,	,1 TITLE	i	•				
NAME	SHEFFEY, FRANK		I * '	, 2 NAME	i	** ** * *	1	经基础数据证据		
STREET ADDRESS	13			.3 STREE	TADORESS					
CHY-ST-ZIP	MIAMI FL 33173			4 CITY-	ST-ZIP		3 S 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	. 54, 57 P.	Addition	
TITLE	D	☐ DE	LETE :	1 TITLE				☐ Change	☐ Madagon	
			1	.2 NAME	ļ			•		
NAME	FORES, DALE R	•	I :	.3 STREE	T ADDRESS					
STREET ADDRESS	1 (**)			5.4 CITY-		1 77.				
CITY-ST-ZIP	MIAMI FL 33193			3.1 TILE				☐ Change	Addition	
TITLE	STURENT OF CLUB	DI				7				
NAME .	LONG ENT ENT AND IN	,		5.2 NAME			•			
STREET ADDRESS	MARKET TO 1			3.3 STRE	ET ADDRESS					
1	10			6.4 CITY-	ST-ZIP				information	
CITY-ST-ZIP		ii . W ii . Bii . daaa aat	avalify for the	evemr	tion stated	in Section 119.07(3)(i), Flori	da Statutes. I further ce	entity that the	information	

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 a report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an are true to trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable