

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 741829 (6)

1. Corporation Name

MIAMI RUNNERS, INC.



Principal Place of Business

Mailing Address

7920 S W 40 STREET
MIAMI FL 33155

7920 S W 40 STREET
MIAMI FL 33155

3. Date Incorporated or Qualified

02/24/1978

3a. Date of Last Report

05/16/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLANCO, JORGE A.
6977 SW 115 PL UNIT F
MIAMI FL 33173

81 Name

ELLIE NORWITCH

82 Street Address

13120 SW 92 AVENUE #D112

83

MIAMI

33176

84 City

FL

85 Zip Code

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

Ellie Norwitch

(NOTE: Registered Agent signature required when reinstating)

DATE

x 7/8/96

12. OFFICERS AND DIRECTORS

TITLE

S

SMITH, JOANN
1205 MARIPOSA AVE #206
CORAL GABLES FL

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

ED

BLANCO, JORGE A.
6977 SW 115 PL UNIT F
MIAMI FL 33173

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

P/D

STANIEWICZ, JOE
8845 S.W. 99TH STREET
MIAMI FL

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

T/D

MARSHALL, JOHN
8100 SW 163RD CT
MIAMI FL

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

V

MIKE BECKER
13874 SW 102 LN
MIAMI FL 33157

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DELETE

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, changed, or on an attachment with an address.

SIGNATURE:

Ellie Norwitch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305/227-1500

CR2E037 (12/95)