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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

(2)

ALLAPATTAH COMMUNITY ACTION, INC.

FILED Mar 13 1997 8:00am Secretary of State



| Principal Place | of Business | Mailing A | ddress | | | a LORDAL HODDI DIDILA HAND SITON SITON | . UBB I BIBIT BIBIT BIBIT BIBIT BIBIT TABL | |
|--|--|-------------------------------------|---|--------------------------|----------------|--|---|--|
| 2257 NW N. RIVER DR. 2257 NW N. RIVER DR. MIAMI FL 33125-2241 MIAMI FL 33125 | | | | | | | | |
| | | | | | | 3. Date Incorporated or Qualified 05/03/1978 | 3a. Date of Last Report 01/31/1996 | |
| 2. Principal Pr | ace of Business | 2a. Mailin | g Address | ., | | 4. FEI Number 59-2000654 | Applied For Not Applicable | |
| Suite, Apt. #, etc. Suite, Apt. 27 | | | Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & State | 3 | City & 28 | | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip 24 | Country 25 | Zip 29 | 3 | Country 0 | | This corporation has liability for Florida Statutes | intangible tax under s. 199.032, Yes No | |
| | 9. Name and Address of | of Current Registered A | gent | | | 10. Name and Address of New Re | egistered Agent | |
| | | | | 81 | Name | | | |
| ALLIEGRO, ANSELMO 5520 SW 64 AVE | | | | 82 | Street A | Address (P.O. Box Number is Not Acceptable) | | |
| MIAMI FL 33155 | | | | 83 | | | | |
| | | | | 84 | City | | FL 85 Zip Code | |
| 11. Pursuant t | to the provisions of Sections | 617.0502 and 617.150 | , Florida Statutes | the above | -named o | corporation submits this statement for the | | |
| office or re | egistered agent, or both, in | the State of Florida, Suc | h change was aut vo 617 0503. Etorio | thorized by | the corp | corporation submits this statement for the pration's board of directors. I hereby acce | pt the appointment as registered | |
| | Anselmo Alli | laro | 11 017.0000, 11010 | | , , | | 2/01/97 | |
| SIGNATURE | Signature, typed or printed name of re | gistered agent and title if applica | ole. (NOTE | Registered Age | nt signature r | equired when reinstating) | DATE (| |
| 12. | | CERS AND DIRECTORS | | 13. | | ADDITIONS/CHANGES TO OFFI | | |
| TITLE | PCD | | DELETE | 1.1 TITLE | | MESA ARDO | Change Addition | |
| NAME | CABEZAS, RAFAEL | | | 1.2 NAME | - | 3471 NORTH WE | ST 5 78 Streets | |
| STREET ADDRESS CITY-ST-ZIP | 10690 SOUTHWEST MIAMI FL | 8TH ST. | | 1.3 STREET 1.4 CITY-S | | MIAMI, FU 331 | | |
| TITLE | TD | | DELETE | 2.1 TITLE | | Vice chamman/1 | Change Addition | |
| NAME | MESA, ARDO | | | 2.2 NAME | | PACKINGHAM, RA | | |
| STREET ADDRESS | 3471 NORTHWEST 5 | TH ST. | | 2.3 STREET | ADORESS | 1740 NW 55 TA A | | |
| CITY-ST-ZIP | MIAMI FL | | | 2.4 CITY-5 | T-ZIP | MIAMI, FL. 33. | / - 35" | |
| TITLE | VC | | DELETE | 31 TITLE | | Your 2 HIRAM | □ Change □ Addition | |
| NAME | PACKINGHAM, RALP | | | 3.2 NAME | ŀ | JOMEZ TIKAM | 1 0 000 - 41 | |
| STREET ADDRESS | 1740 NORTHWEST 5 | 5TH ST. | | 3.3 STREET | address | 4540 S.W. 68 The | | |
| CITY-ST-ZIP | MIAM! FL | | | 3.4. CITY - 9 | T-ZIP | MIAMI FL 3315 | | |
| THLE | S D | | ☐ DELETE | 4.1 TITLE | | Duector CARAME JESU | Change Addition | |
| NAME | DIAZ, LUIS | | | 4. 2 NAME | - | CHAMME VEOL | 27 | |
| STREET ADDRESS | 1441 SOUTHWEST 4 | 3RD TERR | | 4.3 STREET | address | 3630 S.W. 26Th | | |
| CITY-ST-ZIP | MIAMI FL | | | 4.4 CITY - S | | | /33 | |
| TITLE | D | | DELETE | 5.1 TITLE | ŀ | DUTTON DAME | Change Addition | |
| NAME | GOMEZ, HIRAM | | | 5.2 NAME | | 15550 WEST | 73 | |
| STREET ADDRESS | 4540 SW 68 CT. #4 | | | 5.3 STREET | address | A | / · · · · · · · · · · · · · · · · · · · | |
| CITY-ST-ZIP | MIAMI FL | | | 5.4 CITY-S | T- ZIP | HIALEAH FL | <u> 33/33</u> | |
| TITLE | D | | DELETE | 6.1 TITLE | | itedur Bana | Change Addition | |
| NAME | WILLIAMS, NESTOR | | | 6.2 NAME | | EQUES RAND | y and | |
| STREET ADDRESS | 3010 N.W. 36TH ST. | #136 | | 6.3 STREET | ADDRESS | 16841 N.W. 80TH | | |
| CITY-ST-ZIP | MIAMI FL | | | 6.4 CITY-S | T-ZIP | HIALEAH FL | 33016 | |

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE:

LIDEL MEQUIRED

1/15/17 (305) 683.0466

Director Mr. Jose Enrique Dausa 9145 Fountainblue Blud. #8 Miami, Florida 33172