

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 # 749748 (0)  
1. Corporation Name  
FLORIDA LIONS ATHLETIC ASSOCIATION, INC.



Principal Place of Business  
2274 S.W. 15 ST.  
MIAMI FL 33145  
US

Mailing Address  
2274 S.W. 15 ST.  
MIAMI FL 33145-1328

3. Date Incorporated or Qualified  
11/09/1979

3a. Date of Last Report  
04/21/1995

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

9. Name and Address of Current Registered Agent

PRIETO, JOSE A  
2274 S W 15 STREET  
MIAMI FL 33145

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
FL

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 \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

VPD  
PRIETO, ARMANDO  
2274 SW 15 STREET  
MIAMI, FL 00000

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TO  
PRIETO, NORAL  
2274 SW 15TH ST  
MIAMI, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '2

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

STREET ADDRESS  
CITY - ST - ZIP

2274 S W 15 ST  
MIAMI, FL 00000

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DVP  
HUARTE, JUAN B.  
440 N.W. 59 CT  
MIAMI FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

SD  
ALEGRET, ISABEL M.  
2800 SW 108 AVE  
MIAMI FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

VS  
COSSIO, VICENTE  
5876 SW 16 ST  
MIAMI, FL 00000

14. 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 if changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # 305-857621  
56 3-15-96

CR2E037 (12/95)