

750427

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

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(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

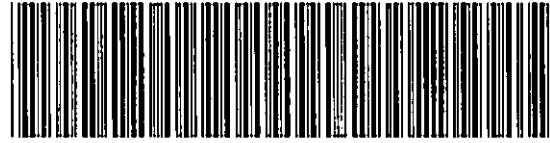
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100327229501

750427

DIVISION OF CORPORATIONS

NAME Harold C. Culmer, P.A.  
 ADDRESS 5022 NW 7th Ave  
 CITY Miami STATE FL ZIP CODE 33127  
 AREA CODE & PHONE NUMBER \_\_\_\_\_  
 NAME OF CORPORATION Organization of Minority Correctional Officers, Inc.

750427

FOR OFFICE USE ONLY

<input type="checkbox"/> DOMESTIC	<input type="checkbox"/> AMENDMENT	<input type="checkbox"/> SEARCH
<input type="checkbox"/> FOREIGN	<input type="checkbox"/> DISSOLUTION	<input type="checkbox"/> MERGER
<input checked="" type="checkbox"/> PROFIT	<input type="checkbox"/> REINSTATEMENT	<input type="checkbox"/> MARK
<input checked="" type="checkbox"/> NON-PROFIT	<input type="checkbox"/> ANNUAL REPORT	<input type="checkbox"/> RESERVATION
<input type="checkbox"/> LIMITED PARTNERSHIP	<input type="checkbox"/> CERTIFICATE UNDER SEAL	<input checked="" type="checkbox"/> CERTIFIED COPY

C. INC.	
F. INC.	30.00
SEARCH	3.00
S. C.	5.00
TOTAL	38.00
REBANK	
BALANCE DUE	
REFUND	
PHOTO COPY	

OK PA MAIL  
1-7-80

RECEIVED  
DEC 31 1 52 PM '79  
SECRETARY OF STATE  
MIAMI, FLORIDA

1-10  
DB

PICKED UP 750427

750-27-22	01-14-80	224	38.00
33	01-14-80	232	5.00
32			

FLORIDA - STATE OF THE ARTS

(K)



# Secretary of State

STATE OF FLORIDA  
THE CAPITOL  
TALLAHASSEE 32304

GEORGE FIRENTONY  
SECRETARY OF STATE

D. W. Mc KEESON, DIRECTOR  
DIVISION OF CORPORATIONS

Harold C. Culmer, P.A.  
5022 N.W. 7th Ave  
Miami, Florida. 33127

January 3, 1980

SUBJECT: ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS, INC.

DOCUMENT NUMBER: 750427

This will acknowledge receipt of the following:

1.  Check(s) totalling \$ 38.00
2.  Articles of Incorporation filed 12/31/79
3.  Amendments to Articles of Incorporation filed
4.  Articles of Merger or Consolidation filed
5.  Certificate of Withdrawal filed
6.  Limited Partnership filed
7.  Limited Partnership Annual Report filed
8.  Trademark Application filed
9.  Application for qualification filed \_\_\_\_\_ It is no longer required to issue a permit. A certificate under seal to this effect may be obtained for \$5.
10.  Reinstatement filed
11.  Articles of Dissolution filed
12.  OTHER:

### ENCLOSED

1.  Certified Copy(ies).
2.  Certificate(s) Under Seal.
3.  Photocopy(ies).
4.  OTHER:

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

SECRET  
STATE OF FLORIDA  
MIAMI  
D-31  
9506 PM '79

IN COMPLIANCE WITH SECTION 48.09, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST--THAT ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS, INC.  
(NAME OF CORPORATION)

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA,  
WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF Miami  
(CITY)

STATE OF Florida, HAS NAMED EDWARD MOORE  
(STATE) (NAME OF RESIDENT AGENT)

LOCATED AT 4111 N.W. 190th Street, Miami, Florida  
(STREET ADDRESS AND NUMBER OF BUILDING,  
POST OFFICE BOX ADDRESSES ARE NOT ACCEPTABLE)

CITY OF Miami, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT  
(CITY)  
SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE Walt D. Clin  
(CORPORATE OFFICER)

TITLE Co-Chairman

DATE 12/11/79

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE [Signature]  
(RESIDENT AGENT)

DATE 12/11/79

750427

ARTICLES OF INCORPORATION

OF

ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS, INC.  
(A NON-PROFIT CORPORATION)

FILED  
DEC 31 2 09 PM '79  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We, the undersigned, hereby associate ourselves together for the purpose of becoming incorporated under the laws of the State of Florida applicable to corporations not for profit, and respectfully petition the Secretary of State for approval of such incorporation under the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation is: ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS, INC.

ARTICLE II NATURE OF BUSINESS

The general nature of the business to be transacted by the corporation shall be:

- A. To improve communication and dialogue between minority correction officers and the Dade County Department of Corrections & Rehabilitation (hereinafter the Dept.)
- B. To improve the relationship between the minority community and the Department.
- C. To encourage the enlistment and participation of minorities in Law enforcement Corrections and Rehabilitation.
- D. To focus upon means of assistance of minority inmates in adjusting to proper rules and procedures in the correctional system.
- E. To disseminate information about educational opportunities available for correction officers.
- F. To improve the welfare of the members and their community.
- G. To seek a uniform and non-discriminatory Dept. policy and equality in hiring, promoting, job assignments and upward mobility of members.

H. To evaluate policies and programs within the correctional system and their effect upon the minority community.

I. To direct, supervise, participate in and support corrections work activities in Dade County and throughout the United States.

J. To plan details and perform activities and services which are supportive of cultural and social progress in similar Corrections and Rehabilitative and related fields, whether such details, activities and services are economic or not.

K. To actively support and encourage at all levels participation in Corrections and Rehabilitation by qualified citizens and to assist said participation in an appropriate manner.

L. To provide procedures and mechanisms for the full utilization of opportunities and advancements for the advancement of members whether at home, in foreign states or abroad.

M. To organize and associate with any groups, corporations, persons, fraternities, societies or entities which have or may have similar goals and objectives.

N. To identify with, encourage recognition of and participation in Corrections and Rehabilitations by Blacks, Latins and other groups which have historically been socially, economically and culturally disadvantaged. To further promulgate the principles of American democracy by relating such activity in its proper perspective to the Corrections and Rehabilitations fields, whether such activities are local, domestic or foreign.

The foregoing paragraphs (A through N) shall be construed as enumerating both objects and powers of the corporation, and it is hereby expressly provided that the foregoing enumeration of specific powers shall not be held to limit or restrict in any manner the powers of this corporation.

#### ARTICLE III. USE OF INCOME

All revenue, profit, if any, income and money received

from the conduct of any business or enterprise is to be used and employed for religious, educational, charitable, benevolent and non-profit purposes and not for the benefit of the members of said corporation, either individually or collectively.

#### ARTICLE IV. POWERS

Said corporation is to have the power to do any and all things necessary or expedient for carrying out the said objects and purposes of the corporation and in general to possess all rights, privileges and immunities, and enjoy all the benefits granted to corporations of similar character under the laws of the State of Florida.

#### ARTICLE V. INITIAL CAPITAL

The amount of capital with which this corporation shall begin business is \$1,000.00.

#### ARTICLE VI. TERM OF EXISTENCE

The corporation is to have perpetual existence.

#### ARTICLE VII. PRIMARY PURPOSE

The primary purpose of this corporation shall be to be a non-profit organization and to perform activities and services consistent therewith.

#### ARTICLE VIII. QUALIFICATIONS OF MEMBERS

The membership of this corporation shall constitute all persons hereinafter named as subscribers and any member of a governmental, Correctional or Rehabilitative agency or department within Dade County, Florida, and any past member of a governmental, Correctional or Rehabilitative agency or department. Said person may become a member by applying for membership and payment of dues, provided they receive a 2/3 vote of the Board.

#### ARTICLE IX. OFFICE ADDRESS AND RESIDENT AGENT

The initial post office address of the principal office of the corporation in the State of Florida, and the Resident Agent is: c/o 6161 N.W. 9th Avenue, Miami, Florida 33142.

The Board of Directors may from time to time move the principal office to any other address in Florida.

#### ARTICLE X. OFFICERS (MANAGEMENT)

Section 1. The officers, who shall manage the corporation shall be a Chairman, Co-Chairman, 1st Vice Chairman, 2nd Vice Chairman, Recording Secretary, Financial Secretary and Communications Officer, and such other officers as may be provided in the by-laws.

Section 2. The general membership shall elect every two (2) years in odd numbered years, the Chairman, Co-Chairman, 1st Vice Chairman, 2nd Vice Chairman, Recording Secretary, Financial Secretary and Communications Officer, and in the even numbered years, for two (2) years, the three (3) at-large members shall be elected.

#### ARTICLE XI. DIRECTORS

The corporation shall have seven (7) directors initially. The number of directors may be increased or diminished from time to time, by laws adopted by the membership.

#### ARTICLE XII. INITIAL DIRECTORS

The names and addresses of the persons who are to serve as directors for the ensuing year, or until the first meeting of the corporation, are:

<u>OFFICE</u>	<u>NAME</u>	<u>ADDRESS</u>
Chairman	Edward Moore	4111 N.W. 190th Street Miami, Florida
Co-Chairman	Walter Clark	18445 S.W. 87th Court Miami, Florida
1st Vice Chairman	Francisco Marty	3920 N.W. 13th Street Miami, Florida 33126
2nd Vice Chairman	Aaron Granberry	11640 S.W. 131st Street Miami, Florida
Recording Secretary	Myron Holmes	2211 N.W. 172nd Terrace Miami, Florida
Financial Secretary	Alvin Burke	12601 N.W. 27th Avenue Miami, Florida
Communications Officer	Marrin Beasley	10905 S.W. 141st Lane Richmond Heights, Florida



ARTICLE XIII. BY-LAWS

Section 1. The Board of Directors of this corporation may provide such by-laws for the conduct of its business and for the carrying out of its purposes as they may deem necessary from time to time.

Section 2. Upon proper notice, the by-laws may be amended, altered or rescinded by a 2/3 majority vote of the membership present and voting.

ARTICLE XIV. SUBSCRIBERS


The names and post office address of each subscriber, all of Miami, Dade County, Florida of these Articles of Incorporation are:

<u>NAME</u>	<u>ADDRESS</u>
Edward Moore	4111 N.W. 190th Street Miami, Florida
Walter Clark	18445 S.W. 87th Court Miami, Florida
Francisco Marty	3920 N.W. 13th Street Miami, Florida

ARTICLE XII. AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed to them by the membership and approved at a general meeting by a majority of the members entitled to vote therein, unless all the Directors and all the members sign a written statement and manifesting their intentions that a certain amendment of these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned have sealed and subscribed these Articles of Incorporation at Miami, Dade County, Florida for the uses and purposes aforesaid.

  
EDWARD MOORE

  
WALTER CLARK

  
FRANCISCO MARTY

STATE OF FLORIDA )

SS

COUNTY OF DADE )

BEFORE ME, the undersigned authority, personally appeared EDWARD ROORE, WALTER CLARK and FRANCISCO MARTY, each of whom are to me well known to be the persons described in and who subscribed to the above and foregoing Articles of Incorporation, and each of them freely and voluntarily acknowledged before me according to the law that they made and subscribed the same for the uses and purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, at Miami, Dade County, Florida, this 29<sup>th</sup> day of October, 1929.

  
NOTARY PUBLIC

My Commission Expires

Notary Public State of Florida at Large.  
My Commission Expires Nov. 29, 1932.

FILED  
JUL 28 1 50 PM '81  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LETTER & CUS Sent

REINSTATEMENT  
FILED 9/28/81

INVOLUNTARILY  
DISSOLVED 12/9/80

Organization of Minority Correctional Officers, Inc.

R A 3  
REINSTATEMENT 15  
CUS  
72 Privilege Tax  
73 Annual Report  
74 Annual Report  
75 Annual Report  
76 Annual Report  
77 Annual Report  
78 Annual Report  
79 Annual Report  
80 Annual Report 10  
81 Annual Report 10  
TOTAL 38  
Bal. Due  
Refund

*clp 9/28/81*

750427

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

<p>CORPORATION ANNUAL REPORT</p> <p style="text-align: center;">FLORIDA DEPARTMENT OF STATE <del>Secretary of State</del> Secretary of State DIVISION OF CORPORATIONS</p> <p style="text-align: center;"><b>1980 - 1981</b></p> <p style="text-align: center;">THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE</p>	<p style="text-align: center;">DO NOT WRITE IN THIS SPACE</p> <p style="text-align: center;"><b>FILED</b></p> <p style="text-align: center;">SEP 28 1 50 PM '81</p> <p style="text-align: center;">SECRETARY OF STATE TALLAHASSEE, FLORIDA</p>
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READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES  
PLEASE STAPLE CHECK TO ANNUAL REPORT

<p>1. Name and Address of Corporation Principal Office.</p> <p style="text-align: center;"><b>750427</b></p> <p>ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS P.O. Box 161044 Miami, FL</p> <p style="font-size: small;">If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.</p>	<p>2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient</p> <p>Street Address <b>5400NW 22Ave. (Caleb Center)</b></p> <p>P.O. Box No. <b>P.O. Box 161044</b></p> <p>City <b>Miami, FL 33116</b></p> <p>State <b>FL</b> Zip Code <b>33116</b></p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>3. Date Incorporated or Qualified To Do Business in Florida <b>12/31/1979</b></p>	<p>4. Federal Employer Identification Number (FEIN)</p>	<p>5. Date of Last Report <b>First Report made</b></p>
------------------------------------------------------------------------------------------	---------------------------------------------------------	------------------------------------------------------------

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
BROWN, RICHARD	D	22300 S.W. 113 Court	Miami, FL
CLARK, WALTER	D	18445 SW 87th Court	Miami, FL
GRANBERRY, AARON	D	11640 SW 131 Street	Miami, FL
BURKE, ALVIN	S/D	149 NE 71 Street	Miami, FL
JOHNSON, LARRY T.	Tres.	18625 NW 42 Place	Miami, FL
PEELE, JONAH	D	19405 NW 43 Avenue	Miami, FL

<p>7. Registered Agent Information</p> <p>Name <b>LARRY T. JOHNSON</b></p> <p>Street Address (Do NOT Use P.O. Box Number) <b>18625 N.W. 42nd Place</b></p> <p>City, State and Zip Code <b>Opa Locka, FL 33055</b></p>	<p>To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3.</p>
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8. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 807 F.S. I further Certify That I Understand My Signature on This Report to Have the Same Legal Effects As if Made Under Oath.

<p>Typed Name of Signing Officer <b>LARRY T. JOHNSON</b></p>	<p>Title <b>Director</b></p>	<p>Telephone Number <b>305-625-1446</b></p>
<p>Signature <i>Larry T. Johnson</i></p>	<p>Date <b>4/27/81</b></p>	

*4/28/81*



FLORIDA DEPARTMENT OF STATE  
 George Firestone  
 Secretary of State  
 Ron Levitt  
 Assistant Secretary of State

FILED

SEP 28 1 50 PM '81

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 904/488-9840

STATEMENT OF CHANGE OF REGISTERED OFFICE  
 OR REGISTERED AGENT, OR BOTH

To the Secretary of State of the State of Florida.

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

FIRST: The name of the corporation is ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS

SECOND: The address of its present registered office is 6161 N.W. 9TH AVENUE  
MIAMI, FL 33142

THIRD: The address to which its registered office is to be changed is CALEAR CENTER, 5400 N.W. 22 AVE  
MIAMI, FL 33116 P.O. BOX 161044 MIA, FL 33116

FOURTH: The name of its present registered agent is MOORE, EDWARD  
4111 N.W. 190TH STREET MIAMI, FL 33055

FIFTH: The name of its successor registered agent is LARRY T. JOHNSON  
18525 N.W. 42ND PLACE OPALOCKA, FL 33055

SIXTH: The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

SEVENTH: Such change was authorized by resolution duly adopted by its board of directors.

Dated April 27, 1981

ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS  
 (exact corporate name)

SIGNATURE Walt A. Clew  
 (President or Vice-President)

DATE 27 April 81

SIGNATURE Larry T. Johnson  
 (Registered Agent)

DATE 27 April 81

FILING FEE: \$3.00

*cfp 9/28/81*

FILED  
SEP 28 1 50 PM '81  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
DEPT. OF STATE  
000287 SEP 25 81  
REVENUE

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION  
ANNUAL REPORT  
1982



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

FILED  
APR 22 11 00 AM '82

Read Notice and Instructions on Other Side Before Making Entries  
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

750427  
ORGANIZATION OF MINORITY CORRECTIONAL  
5400 N.W. 22 AVE. (CALEAB CENTER)  
P.O. BOX 161044  
MIAMI, FL 33116

12/31/1979

09/28/1981

BROWN, RICHARD	D	22300 S.W. 113 COURT	MIAMI, FL
CLARK, WALTER	D	18445 S.W. 87TH COURT	MIAMI, FL
GRANBERRY, AARON	D/Pres	13640 S.W. 131 STREET	MIAMI, FL
BURKE, ALVIN	S/O	149 N.E. 71 STREET	MIAMI, FL
JOHNSON, LARRY T.	T	18625 N.W. 42 PLACE	MIAMI, FL
PEELE, JONAH	D	19405 N.W. 47 AVE.	MIAMI, FL
<i>Bryant, Gwendolyn</i>	D/Pres	10440 SW 178 Street	MIAMI, FL

Registered Agent Information

JOHNSON, LARRY T.  
18625 N.W. 42ND PLACE  
OPA LOCKA, FL 33055

*Gwendolyn Bryant*  
10440 SW 178 Street v  
PERRINE FL 3357

\$3.00 additional fee required for Registered Agent changes.

22 January 1982

1/22/82

*Gwendolyn Bryant*  
Gwendolyn Bryant

*Vice president*  
CORRECTIONAL CENTER

1-22-82  
335 9131

AP  
4/20

750427

PRINTOUT SENT RA

LETTER SENT \_\_\_\_\_

CUS \_\_\_\_\_

REINSTATEMENT FILED 9/28/90

INVOLUNTARILY DISSOLVED 11/10/83

007	3509	5/06/85	10.00	85
007	3509	5/06/85	5.00	85

REINSTATEMENT \$15

CUS

REGISTERED AGENT \$3

OVERPAYMENT

- 72 Privilege Tax
- 73 Annual Report
- 74 Annual Report
- 75 Annual Report
- 76 Annual Report
- 77 Annual Report
- 78 Annual Report
- 79 Annual Report
- 80 Annual Report
- 81 Annual Report
- 82 Annual Report

- 83 Annual Report \$20
- 84 Annual Report \$20
- 85 Annual Report \$20
- 86 Annual Report \$20

TOTAL \$98  
 REFUND

RECEIVED  
 11/10/83

NAME AVAILABLE AD 4/23/50  
 REINSTATED BY AD 4/27/80  
 UPDATER AD 1/29/80  
 UPDATER VERIFYER 28 5/2

Organization of Minority Correctional

Officers, Inc.



CORPORATION

ANNUAL REPORT

83-1985



Read Notice and Instructions on Other Side Before Making Entries  
Filing Fee of \$20 Required - Make Checks Payable To: Secretary

Name and Address of Corporation Principal Office: 7504 27th

ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS  
P.O. BOX 470309  
Miami, Florida 33147

Enter Change of Address Office P.O. Box Number Above

1932 1/2 W. 39th  
P.O. Box 470309

City: Miami FL  
State: FL Zip Code: 33055

If above address is different in any way from correct address in item 2, include Zip Code

Date incorporated or qualified to do business in Florida: 1978

Federal Employer Identification Number (EIN) applied for

Date of last report: 1984

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LARRY JOHNSON, CHAIRMAN	C.	4360 N.W. 79 Ave	Miami, FL. 33166
DELORES, KOOTEN, VICE CHAIRMAN		12565 N.W. 20 Avenue	Miami, FL. 33054
JOHNNY TOMER	DIR.	3101 N.W. 165 St.	Miami, FL. 33054
EVERALD GILLINGS	DIR.	7780 S.W. 90 St.	Miami, FL. 33176
RICHARD BROWN	DIR.	5516 N.W. 199 Terr.	Miami, FL. 33177
LEROY WESTON	DIR.	1521 N.W. 51 St.	Miami, FL. 33149
AARON GRANBERRY	DIR.	11640 S.W. 131 St.	Miami, FL. 33176

Registered Agent Information

Name and Address of Current Registered Agent	Name	FARRISTINE L. WADE
	Street Address (Do NOT Use P.O. Box Number)	19321 N.W. 39th Court
	City, State and Zip Code	Miami, Florida 33055

I, the undersigned, being a resident of the State of Florida, do hereby certify that the above information is true and correct to the best of my knowledge and belief, and I accept the obligations of Section 607.025 F.S.

SIGNATURE: Farristine L. Wade

DATE

\$3.00 additional fee required for Registered Agent changes.

I Certify That I Am An Officer of the Corporation, the Inclusion of Whose Name is Required by Chapter 607 F.S. Officer's Name Must Be Listed in Block 2

Signature: Larry Johnson, Chairman

Date

\$5 additional fee required for a Certificate of Status

CORPORATION WILL BE DISSOLVED IF THIS REPORT IS NOT FILED BY NOV. 16, 1987

CORPORATION  
ANNUAL REPORT  
1987



Secretary of State  
DIVISION OF CORPORATIONS

1987 NOV -3 9 12 32

Read Notice and Instructions on Other Side Before Making Entries  
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:  
750427 7  
ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS  
10321 N.W. 39TH COURT  
P.O. BOX 470309  
MIAMI, FL 33055

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient  
Street Address 21: 13881 N.E. 2 Ct #9  
P.O. Box No. 22:  
City and State 23: Miami, Florida  
Zip Code 24: 33161

3. Date of Organization of Qualified Business in Florida: 12/31/1979  
4. Federal Employer Identification Number (FEIN): Applied For  
5. Date of Last Report: 04/28/1986

6. Name and Street Address of Each Officer and Director as of December 31, 1986

Name of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use P.O. Box Numbers)	City and State
ROBINSON, LARRY	C	4360 NW 79TH AVENUE	MIAMI, FL
LOSTON, DELORES	V	12565 NW 20TH AVENUE	MIAMI, FL
WICKER, JOHNNY	D	3101 NW 165TH STREET	MIAMI, FL
WILLINGS, EVERALD	D	7720 SW 90TH STREET	MIAMI, FL
SMITH, RICHARD	D	5516 NW 199TH TERRACE	MIAMI, FL
WESTON, LEROY	D	1521 NW 51 STREET	MIAMI, FL

**REGISTERED AGENT INFORMATION**

7. Name and Address of Current Registered Agent:  
MRS. FARRISTINE L.  
19321 N.W. 39TH COURT  
MIAMI, FL 33055-0704

8. Name and Address of New Registered Agent:  
Farristine L. Wade  
Street Address 1 (Do NOT Use P.O. Box Numbers): 6552 S. Raymond Drive  
Street Address 2 (Do NOT Use P.O. Box Numbers):  
City and State 84: MIAMI FL 85: 33025

9. I consent to the provisions of Sections 607.014 and 607.017, Florida Statutes, which apply to this corporation, incorporated under the laws of the State of Florida, and to the appointment for the purpose of changing the registered office, or registered agent, or both, in the State of Florida, and the change was authorized by resolution duly adopted by its board of directors (or).

10. I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.014 F.S.  
Signature: *Farristine L. Wade* DATE: 10/24/87  
Registered Agent Accepting Appointment:

25.00 additional fee required for Registered Agent Approval

See a separate restriction under instructions on reverse side of this form  
11. I, the undersigned, being an Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S., do hereby certify that I understand my signature on this report shall have the same legal effects as if made under oath.

Signature: *Larry Johnson* DATE: 10/24/87  
Name: Larry Johnson Chairman  
205 8417752

**FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.**

CORPORATION

ANNUAL REPORT  
1988



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

**Filing Fee of \$25 Required — Make Checks Payable To: Secretary of State**

1. Name and Address of Corporation Principal Office

750427  
ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS,  
13881 N.E. 2 CT., #9  
P.O. BOX 470309  
MIAMI, FL 33161

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Z.C. Code 24

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code.

3. Date of Renewal of Qualities To Do Business in Florida

12/31/1979

4. Filing of Engineer

Registration Number, F.E.N.

5. Date of Last Report

11/03/1987

Name and Street Addresses of Each Officer and Director, as of December 31, 1987

1. Name of Officer or Director	2. Title	3. Street Address of Each Officer or Director (DO NOT USE P.O. BOX NUMBER)	4. City and State
JOHNSON, LARRY	C	4360 NW 79TH AVENUE	MIAMI, FL
ROTTEN, BELORES	V	12565 NW 20TH AVENUE	MIAMI, FL
TOLMER, JOHNNY	D	3101 NW 165TH STREET	MIAMI, FL
MIDINGS, EMBALD	C	7780 SW 90TH STREET	MIAMI, FL
BROWN, RICHARD	D	5516 NW 199TH TERRACE	MIAMI, FL
WESTON, LEROY	D	1521 NW 51 STREET	MIAMI, FL

**REGISTERED AGENT INFORMATION**

6. Name and Address of Current Registered Agent

WADS, FARRISTINE L.  
4552 S. HAMPTON DRIVE  
MIAMI, FL. 33025

7. Name and Address of New Registered Agent

Name 81

Street Address 1 (DO NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

Z.C. Code 85

FL

I, Secretary of State, in compliance of Chapters 407.004 and 407.005, Florida Statutes, the State having first been incorporated under the laws of the State of Florida, submit this statement of the substance of the report of the corporation of which I am Secretary of State, as required by both of the State of Florida. This statement was prepared by the inclusion of all information required by the said chapters of the Statutes. I hereby certify the accuracy of the report of the corporation, and hereby certify the registration of Section 407.005 F.S.

SECRETARY

*Farristine L. Wads*  
Registered Agent Accepting Appointment

DATE

June 6, 1988

8. A check or cash shall not be transmitted outside of Florida.

See instructions on reverse side of this form.

Clerk of the Court, an Officer or Director of the Corporation, the Register or Business Employment to Execute This Report as Required by Chapter 407 F.S. must certify that the foregoing is a true and correct copy of the report of the corporation and that the same is a true and correct copy of the report of the corporation and that the same is a true and correct copy of the report of the corporation and that the same is a true and correct copy of the report of the corporation.

9. Name

*James O. Carter*

Date

\$5 Additional Fee  
required for a  
Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT  
1989



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

1989 JUN 23 AM 9:46  
FLORIDA DEPARTMENT OF STATE  
CORPORATIONS DIVISION  
TALLAHASSEE, FLORIDA

Read Notes and Instructions on Other Side Before Making Entries  
Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

Name and Address of Corporation Principal Office

ZIP + 4

750427 7  
ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS,  
13881 N.E. 2 CT., #9  
P.O. BOX 470309  
MIAMI, FL 33161

Enter Change of Address of Corporation Principal Office P.O. Box Number, Agency, and ZIP + 4

Street Address of

8552 Southampton Dr.

P.O. Box No.

P.O. Box 470306

City

Miramar, Fl

State

33025

Corporate Officers to be Reported Only. Use of this form is optional.

Name	Address	City	State	Zip	Date
C JOHNSON, LARRY	4368 NW 79TH AVENUE	MIAMI	FL		12/31/1979
V WOOTEN, DELORES	12565 NW 20TH AVENUE	MIAMI	FL		
D TOOMER, JOHNNY	3101 NW 165TH STREET	MIAMI	FL		
D WEISSBERG, EVERALD	7780 SW 90TH STREET	MIAMI	FL		
D BROWN, RICHARD	5616 NW 109TH TERRACE	MIAMI	FL		
D WESTON, EROY	1601 SW 51 STREET	MIAMI	FL		

REGISTERED AGENT INFORMATION

WARR, FARRISTINE L.  
8552 S. HAMPTON DRIVE  
MIRAMAR, FL. 33025

FL

Section 220.01, Florida Statutes, requires that every corporation have a registered agent in Florida to receive legal notices. The registered agent must be a resident of Florida or a corporation organized under the laws of Florida. The registered agent must be at least 18 years of age and have a physical address in Florida. The registered agent must be available during normal business hours to accept service of process. The registered agent must be a resident of Florida or a corporation organized under the laws of Florida. The registered agent must be at least 18 years of age and have a physical address in Florida. The registered agent must be available during normal business hours to accept service of process.

Section 220.02, Florida Statutes, requires that every corporation have a registered agent in Florida to receive legal notices. The registered agent must be a resident of Florida or a corporation organized under the laws of Florida. The registered agent must be at least 18 years of age and have a physical address in Florida. The registered agent must be available during normal business hours to accept service of process. The registered agent must be a resident of Florida or a corporation organized under the laws of Florida. The registered agent must be at least 18 years of age and have a physical address in Florida. The registered agent must be available during normal business hours to accept service of process.

Section 220.03, Florida Statutes, requires that every corporation have a registered agent in Florida to receive legal notices. The registered agent must be a resident of Florida or a corporation organized under the laws of Florida. The registered agent must be at least 18 years of age and have a physical address in Florida. The registered agent must be available during normal business hours to accept service of process. The registered agent must be a resident of Florida or a corporation organized under the laws of Florida. The registered agent must be at least 18 years of age and have a physical address in Florida. The registered agent must be available during normal business hours to accept service of process.

Signature: Farristine English  
Farristine English V/President  
12/15/89  
437-9674 (3000)

TITLE	NAME	ADDRESS	CITY/STATE
CHAIRMAN	Albert Davis	10805 SW 141 Ave.	Miami, Fl.
V/PRESIDENT	Farristine English	8552 S.Hampton Dr.	Miramar, Fl.
S/DIRECTOR	Everald Gillings		Miami, Fl.
T/DIRECTOR	Joyce Chester	320 N.W. 206 Terr.	Miami, Fl.
DIRECTOR	Tim Gibson	3071 N.W. 64 St.	Miami, Fl.

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

10/20/79

ANNUAL REPORT  
1990



DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries  
Filing Fee of \$35 Required - Make Checks Payable To: Secretary of State

750427 7

ZIP + 4 PRESORT  
ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS,  
8558 SOUTHAMPTON DR.  
P.O. BOX 470306  
MIAMI, FL 33025-2833

1823 N.W. 192nd Street  
P.O. BOX 470306  
MIAMI, FLORIDA 33147  
33147

State address of 1989 or other year if different from above

Date of Filing: 12/31/1979  
Filing Fee Applied: APPLIED FOR 59-2090032

Class	Name of Officers and Directors	Street Address of Each Officer and Director	City and State
C	DAVIS, ALBERT	10805 SW 141 AVE.	MIAMI, FL
	PARISH, ERNEST	11014 S.W. 155th TERR.	MIAMI, FL
V	ENGLISH, FARRISTINE	8552 S. HAMPTON DR	MIRAMAR, FL
	MCKENZIE, CHARLES	11 N.W. 70th ST.	MIAMI, FL
S/D	GILLINGS, EVERALD	7780 SW 90TH ST.	MIAMI, FL
	ADKINS, CLORA	1823 N.W. 192nd ST.	MIAMI, FL
T/D	CHESTER, JOYCE	920 NW 286 TERRACE	MIAMI, FL
	DAWSEY, ANTHONY	8021 N.E. 7th AVE.	MIAMI, FL
D	GIBSON, TIM	3671 NW 84 ST.	MIAMI, FL
	FAISON, WANDA	7025 N.W. 28th AVE.	MIAMI, FL

REGISTERED AGENT INFORMATION

WADE, FARRISTINE L.  
8552 S. HAMPTON DRIVE  
MIRAMAR, FL. 33025

ADKINS, CLORA  
1823 N.W. 192nd Street  
Miami, Florida 33147

FL. 33147

*Clora S. Galyon*

10/20/79

*Ernest Parish*

ERNEST PARISH

PRESIDENT

10/12/90

305-255-2314

25 Additional copies required

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION  
ANNUAL REPORT  
1991



FLORIDA DEPARTMENT OF STATE  
200 South  
Seminole Street  
DIVISION OF CORPORATIONS

APPROVED  
FILED  
91 JUL 24 10:35

**FILING FEE OF \$61.25 REQUIRED**

and Mailing Address of Corporation **DOCUMENT #750427 (7)**

**ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS, INC.**  
1823 N.W. 192ND STREET  
P.O. BOX 470306  
MIAMI, FL 33147

DO NOT WRITE IN THIS SPACE

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The address of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box

23 City and State

24 Zip Code

NOTE: Address is incorrect in any way enter the correct address in Block 2. Include Zip Code.

3 Incorporated or Chartered  
Date in Florida  
**12/31/1979**

4 FEI Number  
**59-2090032**

5 FEI Number Applied For

6 FEI Number Not Applicable

7 **\$8.75 Additional Fee required for a Certificate of Status**

**CERTIFICATE OF STATUS DECIRED**

1	2	3	4
Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT use P.O. Box Numbers)	City and State	
C <b>PARISH, EARNEST</b>	<b>11014 S.W. 155TH TERR</b>	<b>MIAMI, FL</b>	
V <b>MCKENZIE, CHARLES</b>	<b>11 N.W. 70TH STREET</b>	<b>MIRAMAR, FL</b>	
S/D <b>ADKINS, CLORA</b>	<b>1823 N.W. 192ND STREET</b>	<b>MIAMI, FL</b>	
T/D <b>DAWSEY, ANTHONY</b>	<b>8021 N.E. 7TH AVENUE</b>	<b>MIAMI, FL</b>	
D <b>FAISON, WANDA</b>	<b>7025 N.W. 28TH AVENUE</b>	<b>MIAMI, FL</b>	

**REGISTERED AGENT INFORMATION**

8 Name and Address of Current Registered Agent

9 Name and Address of Current Registered Agent

**ADKINS, CLORA**

10 Street Address (Do NOT use P.O. Box Numbers)

**1823 N.W. 192nd STREET**

11 City and State (Do NOT use P.O. Box Numbers)

**MIAMI FL 33056**

See the provisions of Section 607.402 and 607.403, Florida Statutes, that require every corporation to file a statement for the purpose of determining its status in Florida. Such statement is authorized by the corporation's board of directors.

X *Clora T. Adkins* (Registered Agent Accepting Appointment) DATE **05/15/91**

X *Earnest Parish* (President)

**EARNEST PARISH** PRESIDENT 305 255-2314

**FILING FEE OF \$61.25 REQUIRED - Make Checks Payable To: Secretary of State \$8.75 Additional Fee required for a Certificate of Status**

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

ANNUAL REPORT  
1992



FLORIDA DEPARTMENT OF REVENUE  
CORPORATE STATUS REPORT

**FILING FEE \$61.25 Make Payable To: Secretary of State**

**DOCUMENT # 760427 (7)**  
**ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS, INC.**  
1823 N.W. 192ND STREET  
P.O. BOX 470306  
MIAMI FL 33247-0306

2. If the corporation is a partnership, it must file a partnership return with the Internal Revenue Service and provide the partnership's federal identification number to the Secretary of State. The return must be filed by the 15th day of the month following the end of the reporting year.  
21. Making Address  
22. Filing Office  
23. Date of Filing  
3. Corporation's Federal Identification Number: 12/31/1979

07/24/1991 59-2090032 \$8.75 National Fee (required for a Certificate of Status)

1	2	3	4
C	<del>PARISH, EARNEST</del>	<del>11014 S.W. 155TH TERR</del>	<del>MIAMI, FL</del>
	CLARK, WALTER	18445 S.W. 87th CT.	
V	<del>MCKENZIE, CHARLES</del>	<del>11 N.W. 70TH STREET</del>	<del>MIRAMAR, FL</del>
STP V	ADKINS, CLORA	1823 N.W. 192ND STREET	MIAMI, FL
T/D	DAWSEY, ANTHONY	8021 N.E. 7TH AVENUE	MIAMI, FL
D	<del>FAISON, WANDA</del>	<del>7025 N.W. 28TH AVENUE</del>	<del>MIAMI, FL</del>
	BEASLEY, DARLENE	5744 N.W. 168 TERRACE	MIAMI, FL.
S/D	MCCLEOD, VAL	6750 NW 186th ST. # 403	Miami, FL.

**REGISTERED AGENT INFORMATION**

ADKINS, CLORA  
1823 N.W. 192ND STREET  
MIAMI, FL 33056

11. Name: McCleod, VAL  
12. Address: 6750 NW 186th St. # 403  
13. City: Miami Hialeah, FL 33015

X *Val McCleod* 6-30-92

SIGNATURE *Walter Clark* 6-30-92  
WALTER CLARK PRESIDENT/CHAIRMAN 305 547 7080



File Now. Filing Fee after May 1 is \$225.00

APPROVED  
AND  
FILED

93 MAR 30 PM 3:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1993



FLORIDA DEPARTMENT OF STATE  
JULY 1929  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 750427 (7)

ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS,  
INC.  
1823 N.W. 192ND STREET  
P.O. BOX 470306  
MIAMI FL 33247-0306

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Created 12/31/1979  
3a. Current Fiscal Year 07/14/1992

4. FEI Number 592090032

5. Certificate of State Design  \$8.75 Additional Fee (Required)

6. Federal Campaign Financing  \$5.00 (May Be Added to Fees)

7. Report with MS 1031001  \$138.75 (Supplemental Fee Not Imposed)

8. This corporation has been the beneficiary of a charitable contribution

FILING FEE ANNUAL REPORT \$81.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE  
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

2a. Principal Place of Business  
26. State  
27. City & State  
28. City & State  
29. Country  
30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCCLEOD, VAL  
6750 NW 186 ST #403  
MIAMI FL 33015

B1. Name  
B2. Street Address (P.O. Box for banks, not for business)  
B3. Telephone Number  
B4. City, State, ZIP Code

11. I, the undersigned, Secretary of State, do hereby certify that the information furnished on this report is true and correct to the best of my knowledge and belief, and that I am a resident of this state and am qualified to perform the duties of my office.

12. OFFICERS AND DIRECTORS	13. OFFICERS AND DIRECTORS CHANGES
C CLARK, WALTER 18445 SW 87TH CT MIAMI FL	
S/D MCCLEOD, VAL 6750 NW 186 CT MIAMI FL	
V ADKINS, CLORA 1823 N.W. 192ND STREET MIAMI FL	
T/D DANSEY, ANTHONY 8021 N.E. 7TH AVENUE MIAMI FL	
D BEASLEY, DARLENE 5444 NW 186 TERR MIAMI FL	

SIGNATURE *Val McCleod*  
VAL McCleod

SECRETARY

3-2-93  
305 547 3093

*Handwritten signature/initials*

FOR REINSTATEMENT

1974

DOCUMENT # 750427

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

94 DEC -1 PM 4:26

H 12/14

ORGANIZATION OF MINORITY CORRECTIONAL OFFICERS, INC.

P.O. BOX 470006  
MIAMI FL 33247-0006

P.O. BOX 470006  
MIAMI FL 33247-0006

RECEIVED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

8021 NE 7th AVE P.O. Box 470306 Miami, Fl. 33147 33147 USA	8021 NE 7th AVE P.O. Box 470306 Miami, Fl. 33147 USA
---------------------------------------------------------------------	---------------------------------------------------------------

12/31/1979

59-2090032

X \$2.75 Additional Fee for Certificate

Name of Officer and Position	Address	City	State	Zip
C CLARK, WALTER	18445 SW 87TH CT	MIAMI	FL	
SD <del>MCCLEOD, VAL</del> RIVERS, DELORES	<del>6750 NW 186 CT</del> 12565 N.W. 20th AVE	MIAMI	FL	33127
V <del>ADKINS, FLORA</del> DRANE, PAMELA	<del>1823 N.W. 192ND STREET</del> 20245 NW 3rd AVE	MIAMI	FL	33169
TD DAWSEY, ANTHONY	8021 N.E. 7TH AVENUE	MIAMI	FL	
D <del>BEASLEY, DARLENE</del> JACKSON, LAMAR	<del>5444 NW 186 TERR</del> 650 DUNAD AVE	MIAMI	FL	33054

8. Name and Address of Current Registered Agent

~~MCCLEOD, VAL~~  
~~6750 NW 186 ST~~  
~~MIAMI FL 33115~~  
ANTHONY DAWSEY  
8021 NE 7th AVE  
MIAMI, FL A. 33138

9. Name and Address of New Registered Agent

ANTHONY DAWSEY  
8021 NE 7th AVE  
MIAMI  
FL 33138

ANTHONY DAWSEY  
REGISTERED AGENT

10-7-94

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box.

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No

SIGNATURE: *Anthony Dawsey* ANTHONY DAWSEY 10-7-94 305.229.7560