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FILED

May 19 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 752549 (6)

1. Corporation Name

JUNIOR ACHIEVEMENT OF GREATER MIAMI, INC.



Principal Place of Business

Mailing Address

2397 COLLINS AVE  
SUITE 341  
MIAMI BEACH FL 33139  
US

2397 COLLINS AVE  
SUITE 341  
MIAMI BEACH FL 33139-1609  
US

3. Date Incorporated or Qualified  
05/20/1980

3a. Date of Last Report  
02/07/1996

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

4. FEI Number

59-0807486

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



9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HAGA, CATHERINE L.  
2397 COLLINS AVE  
~~SUITE 341~~  
MIAMI BEACH FL 33139

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ~~12~~ D ☐ DELETE  
NAME SCHUETTE, CHARLES  
STREET ADDRESS ONE SE THIRD AVE 28TH FLOOR  
CITY-ST-ZIP MIAMI FL

1.1 TITLE D ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ~~12~~ D ☐ DELETE  
NAME HERSHMAN, JEFFREY  
STREET ADDRESS 701 BRICKELL AVE, 33RD FLOOR  
CITY-ST-ZIP MIAMI FL

2.1 TITLE D ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ~~12~~ D ☒ DELETE  
NAME ~~DUNCAN, EDWARD~~  
STREET ADDRESS ~~777 BRICKELL AVENUE~~  
CITY-ST-ZIP ~~MIAMI FL~~

3.1 TITLE ~~12~~ D ☒ Change ☒ Addition  
3.2 NAME Dobin, Josh  
3.3 STREET ADDRESS 19495 Biscayne Blvd  
3.4 CITY-ST-ZIP N. MIA BLCH, FL 33180

TITLE ~~12~~ D ☐ DELETE  
NAME KRANYS, RUDY  
STREET ADDRESS PO BOX 025700 NA  
CITY-ST-ZIP MIAMI FL

4.1 TITLE D ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ~~12~~ D ☐ DELETE  
NAME JOHNSON, J. WAYNE  
STREET ADDRESS 3600 NW 82 AVE.  
CITY-ST-ZIP IAMI FL

5.1 TITLE D ☒ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ~~12~~ D ☐ DELETE  
NAME HAGA, CATHERINE L.  
STREET ADDRESS 2397 COLLINS AVE  
CITY-ST-ZIP MIAMI BEACH FL

6.1 TITLE D ☒ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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, or on an attachment with an address.

SIGNATURE: Catherine L. Haga, President

4/15/97 305-534-1388

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0027452

CP2E037 (9/96)