FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 752549

1. Corporation Name

JUNIOR ACHIEVEMENT OF GREATER MIAMI, INC.

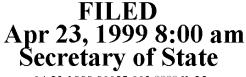
Principal Place of Busines									
2397 COLLINS AVE MIAMI BEACH FL 33139 US	,								

2. Principal Place of Business

Mailing Address

2397 COLLINS AVE MIAMI BEACH FL 33139

2a. Mailing Address



04-23-1999 90027 003 ****61.25

3. Date Incorporated or Qualifed

05/20/1980

-:												
Suite, Apt.	#, etc		Suite, Apt. #, etc.					Number		App	lied For	
[· ;	27					59-0807486			Not	Applicable	
City & Stat	6: 20 to 10	City & State					5.0-	difference of Status Desired		\$8.75 Ad	dditional	
:3		28	28				J. Ce	rtifcate of Status Desired	· •	Fee Required		
Zip	Country		Zip Cou				6. Ele	ction Campaign Financing	П	\$5.00 N	May Be	
·4	25	29		30			Tru	ist Fund Contribution	u	Added to	Fees	
	9. Name and Address of Current F	Regist	ered Agent				10. Na	me and Address of New	Registered A	gent		
					81	Name					1	
HAGA CATHERIES												
HAGA, CATHERINE L						Street Address (P.O. Box Number is Not Acceptable)						
2397 COL					83							
SUITE 944												
, MIAMI BEA	ACH, FL 33139, 👙				84 City FL 85 Zip Code							
	<u> 8920 22 20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 </u>				لِـــــــــــــــــــــــــــــــــــــ						paintared	
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 WITH PAUL PAUL PAUL PAUL PAUL PAUL PAUL PAUL												
	Signature, typed of printed name of registered agent a					signature required			DATE	DIDECTOR	10 IN 12	
12.	OFFICERS AND	DIREC		13.				ITIONS/CHANGES TO OF				
TITLE	D		☐ DELETE	1,1 T	ΠE	/	MAXI	NE KAPLAI	Y	Change	Addition	
NAME	SCHUETTE, CHARLES			1.2 N	AME		SON	TRUST BANK BRICKELL	LH	FL.	}	
STREET ADDRESS	ONE-SE THIRD AVE 28TH FLOOF	₹		1.3 S	TREET	ADDRESS					1	
CITY-ST-ZIP	MIAMI FL			1.4 0	aty-st	-ZIP	<u>M</u>	Immi FL	33/3			
TITLE	D		☐ DELETE	2.17	ΠLE					Change	Addition	
NAME	HERSHMAN. JEFFREY			2.2 N	AME	i		أ شده ر	5TH FO		1	
STREET ADDRESS	784 BRICKELL AVE, SORD-FLOOP	4		2.3 \$	TREET	ADDRESS /	100 5	E 25T 1	DIMPL	-	ì	
CITY-ST-ZIP	MIAMI FL	•	•	240	слу-в	T-7IP	MIA	mi FL 33	131			
TITLE	D		☐ DELETE	3.1 T				<u> </u>		Change	☐ Addition	
NAME	DUBIN, JOSH		—· «· • ·	32 N	AME	1				X	` }	
	10406 BISCAYNE BLVD					ADDRESS /	100 5	E 2 5T #	2100		1	
STREET ADDRESS	N-MIAMI-BEACH-FL					1 -	MIA	•			İ	
CITY-ST-ZIP	D MIXMIT DEAGHT FE		☐ DELETE	4.1 T	OTY-S	(-2)F		··· / <u> </u>	<u> </u>	Change	☐ Addition	
TITLE			C pereve	1				•		7	_	
NAME	ESCANDON, EMILIO				NAME		200 4	5. BISCAYNE	= BLV	0 # 41	78	
STREET ADDRESS	100_SE_END_CT, #2500									·	ì	
CITY-ST-ZIP	MIAMI FL 33131				ITY-ST			mi FL 33		Chenna	CS Addition	
TITLE	D		☐ DELETE	5.1 T		\ ~	TGRA	FI VELASIO	2	Change	Addition	
NAME	J OHNSON, J. WAYNE-				IAME	17	מות	EL VELASCO	L		. \	
STREET ADDRESS	3600 NW 62 AVE:					ADDRESS C	man D	BRICKELL, 11:	th FC			
CITY-ST-ZIP	IAMI-FL				TY-ST	-ZIP /o	MO I	ami FI	3/21			
TITLE	D		☐ DELETE	6.1 T	TLE		1.1.1			Change	☐ Addition	
NAME	HAGA, CATHERINE L.			6.2 N	IAME	}					ł	
STREET ADDRESS				6.3 S	TREET	ADDRESS						

CITY-ST-ZIP MIAMI BEACH FL 14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

RODRIGUEZ 3055341388

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