FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 752898

(7)

Mailing Address

THE BALOGH FAMILY FOUNDATION, INC.

	1	ILEL)
Mar	10	1998	8:00am
Se	cret	tary of	f State

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777 ARTHUR GODFREY ROAD 4TH FLOOR			777 ARTHUR GODFREY ROAD 4TH FLOOR MIAMI BEACH FL 33140				3. Date Incorporated or Qualified 06/12/1980 4. FEI Number Applied For			
MIAMI BEACH FL 33140										
1								\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ot Applicable	ł
2. Principal Place of Business			$\overline{}$	2a. Mailing Address				5. Certificate of Status Desired \$8.75 Additional		
21 26 Subs Act # etc.				Cuito Ant # ata					equired	•
Suite, Apt. #, etc. Suite, Apt. #,				.e. Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
22 City & State				City & State				7. Is this nonprofit corporation a homeowners association?		
23			28					Yes Y No		
Zip					Country			8. This corporation owes or has paid the current year Intangible		
24	2	25	29		30	·		Personal Property Tax due June 30. Yes X No		
	9. Name a	and Address of Cur	rent Registered	d Agent	1221	10. Name and Address of New Registered Agent				
						81	Name			ĺ
BALOGH	I, ROBERT B	s. FSQ.				82	Street (Address (P.O. Box Number is Not Acceptable)		ĺ
	HUR GODF				}	-	Street Address (F.O. Box Northber is Not Acceptable)			
4TH FLO					İ	83				ĺ
	EACH FL 33	140				84	O't-		O d d	ĺ
	- 10 ()	,,,				84	City	FL 85 Zip	Code	ĺ
11. Pursuant	to the provision	ons of Sections 617.0	0502 and 617.15	608, Florida Statu	tes, the at	oove	-named	corporation submits this statement for the purpose of changing i	ts registered	ĺ
office or r	registered age ım familiar with	ent, or both, in the St n. and accept the of	ate of Florida. S bligations of Sec	uch change was ction 617.0503. Fi	authorized orida Stati	d by utes	the corp	corporation submits this statement for the purpose of changing poration's board of directors. I hereby accept the appointment as	registered	ĺ
SIGNATURE		,								ĺ
SIGNATURE.	Signature, typed o	r printed name of registered	agent and little if appl	icable. (NOT	E: Registered	Age	nt signature	e required when reinetating) DATE		5
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		Ş	
TITLE	PD			☐ DELETE	1.1 111	LE		Change	Addition);
NAME		, JOAN BALOGH			1.2 NA	ME				8
STREET ADDRESS	31 EAST				1.3 ST	AEET .	address			Ų
CITY-ST-ZIP	NEW YOR	ik, ny 00000			1.4 CIT	Y-\$1	- ZIP			ò
TITLE	D			☐ DELETE	2.1 TiT			☐ Change	☐ Addition	١
NAME	BALOGH,				2.2 NA	ME				l
STREET ADDRESS		RTHUR GODFREY	RD		2.3 ST	REET	ADDRESS			
CITY-ST-ZIP		ACH, FL 00000		- District	2. 4 Cf		T-ZIP			ĺ
TITLE	STD			DELETE	3.1 TIT			☐ Change	☐ Addition	
NAME		ROBERT B			3.2 NA		- 1			ı
STREET ADDRESS		UR GODFREY #3	110				ADDRESS			
CITY-ST-ZIP	MIAMI BE	ACH FL		Delete	3.4. Cf		T-ZIP		1 della	ı
TITLE				DELETE	4.1 TiT		ľ	! Change	Addition	
NAME					4. 2 NA					
STREET ADDRESS							ADDRESS		l	
CITY-ST-ZIP				DELETE	4.4 CIT		- ZIP	Change	☐ Addition	i
TITLE				C OCCERT	5.1 TIT		İ	Li change		
NAME					5.2 NA					
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP				DELETE	5.4 CIT		- ZIP	Change	Addition	
TITLE				- DEFEIG	6.1 TIT		- 1	i Change	LLI ADDIRON	
NAME					6.2 NAI					
STREET ADDRESS							address			
CITY-ST-ZIP					6.4 CIT	Y-ST	-ZIP			

1. Thereby certify that the information supplied with his tiling 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 supplements 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 of the receiver or tustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if chapted, or pn an attachment with an address.

SIGNATURE:

Robert B. Balogh 3/3/98

(305) 532-7775