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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED
Feb 04 1998 8:00am
Secretary of State

1. Corporation	MEN # 7597	97	(4)					
ADISON	N FOUNDATION, INC.					·		
MIDOI	Y FOUNDATION, INC.					L FØRSEE HANDE ØLIKA INEFT HAND BOSEF HAND MEDEE DEDEL BEDEL DEDEL NEDEE	(81)	
Principal Place	e of Business	Mailing	g Address	r —		j resitt fenat olde seris sesie lein fens elen ereit blætt greit fligtt greit	100r	
% ARNALDO PE	REZ	% ARNA	LDO PEREZ			3. Date Incorporated or Qualified		
3655 NW 87TH AVENUE 3655 NW 87TH AVENUE					08/21/1981	İ		
MIAMI FL 33178	3	MIAMI F	L 33178			4. FEI Number Applied	For	
						59-2128429 Not App		
2. Principal Pi	lace of Business	2a. Ma	iling Address			5. Certificate of Status Desired S8.75 Addition	nai	
21		26		·		Fee Required		
Suite, Apt.	#, etc.		te, Apt. #, etc.	•		6. Election Campaign Financing \$5.00 May 8	e	
City & State		27	/ & State			Trust Fund Contribution Added to Fees		
23		28	, & Cidle			7. Is this nonprofit corporation a homeowners association?		
Zip	Country	Zip		Country	 _	8. This corporation owes or has paid the current year Intangible	ė	
24	25	29		30		Personal Property Tax due June 30. Yes No		
	9. Name and Address of Cu	rrent Registere	d Agent			10. Name and Address of New Registered Agent		
				81	Name			
PEREZ, /	ARNALDO			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
3655 NW	/ 87TH AVENUE	•		-	<u> </u>			
Miami Fi	_ 33178			83			.	
i				84	City	FL 85 Zip Code		
11. Pursuant I	to the provisions of Sections 617/	0502 and 617.1	508. Florida Statut	es, the abov	l e-named coi		stered	
office or re	egistered agent, or both, in the S	tate of Florida, S	luch change was	authorized by	y the corpora	progration submits this statement for the purpose of changing its registration's board of directors. I hereby accept the appointment as registration's	ered	
SIGNATURE	. //////	AR	NALDO 1			1/2/98	ľ	
	Signature, typed or printed name of registers	d agent and title if app	licable. (NOT	E. Registered Ag	ent signature requ	ulrod when reinstating) DATE		
12.		AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2 3	
TITLE								
	VT		DELETE	. 1,1 TITLE		Change L	ddition	
NAME	STURGES, ROBERT B.		L] DELETE	1.2 NAME		Change	Addition	
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I nereby certify that the information supplied with this filling eyes not quality for the exemption stated in Section 119,07(3)(f), Florida Statutes. I further certify that the informatio 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 of rustee 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 a address.

SIGNATURE: