

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2007 8:00 am
Secretary of State

09-06-2007 90009 010 ****61.25

DOCUMENT # 762700

1. Entity Name
NAMI OF MIAMI, INC.



Principal Place of Business
6780 SW 57 AVE
MIAMI, FL 33143

Mailing Address
5711 S DIXIE HWY
MIAMI, FL 33143

2. Principal Place of Business - No P.O. Box #
5711 S DIXIE HWY
Suite, Apt. #, etc.

3. Mailing Address
5711 S DIXIE HWY
Suite, Apt. #, etc.



08022007 Chg-NP CR2E037 (12/06)

City & State
MIAMI FL 33143
Zip **33143** Country **USA**

City & State
MIAMI FL
Zip **33143** Country **USA**

4. FEI Number
59-2207150 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

ROBINSON, JUDITH
11756 SW 102 STREET
MIAMI, FL 33186

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **JUDITH ROBINSON PRES**
Signature, typed or printed name of registered agent and title if applicable.

Judith Robinson
(NOTE: Registered Agent signature required when reinstating)

8-21-07
DATE

Filing Fee is \$61.25
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **ZIMMER, MARK A**
STREET ADDRESS **9225 SW 68 STREET**
CITY-ST-ZIP **MIAMI, FL 33173**

TITLE **VPD** ☒ Delete
NAME **ROBINSON, JUDITH E**
STREET ADDRESS **117 SW 102 STREET**
CITY-ST-ZIP **MIAMI, FL 33186**

TITLE **TD** ☒ Delete
NAME **ZIMMER, MARK**
STREET ADDRESS **9225 SW 68 STREET**
CITY-ST-ZIP **MIAMI, FL 33173**

TITLE **SD** ☐ Delete
NAME **NADEL, LAURIE**
STREET ADDRESS **5941 SW 96 STREET**
CITY-ST-ZIP **PINECREST, FL 33156**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PRES** ☒ Change ☐ Addit
NAME **JUDITH ROBINSON**
STREET ADDRESS **11756 SW 102 ST**
CITY-ST-ZIP **MIAMI FL 33186**

TITLE **VPRES** ☐ Change ☒ Addit
NAME **BRENDA WILKINSON**
STREET ADDRESS **4109 WOODRIDGE RD**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **WILLIAM T. FRANKLIN JR.** ☐ Change ☒ Addit
NAME
STREET ADDRESS **26410 SW 149 PL**
CITY-ST-ZIP **HOWESTEAD FL 33032**

TITLE ☐ Change ☐ Addit
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addit
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addit
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11.

Judith Robinson