

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

AMENDED
CORPORATION
ANNUAL REPORT
~~1996~~ 1997



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

APPROVED
AND
FILED

97 MAY 30 PM 1:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G16634

(9)

1. Corporation Name

Benaja Corporation

Principal Place of Business

Mailing Address

1500 San Remo Avenue
Suite 237
Coral Gables, FL
33146-3047

1500 San Remo Avenue
Suite 237
Coral Gables, FL
33146-3047

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/20/1982

3a. Date of Last Report

04/1997

4. FEI Number

59-2396779

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

29. Country

30. Country

9. Name and Address of Current Registered Agent

Hughey, Bonnie J.
1500 San Remo Avenue
Suite 239
Coral Gables, FL 33146-3047

10. Name and Address of New Registered Agent

81. Name

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

200002196162--6

83. City

-05/30/97--01038--024

84. State

*****61.25 *****61.25

FL

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Bonnie J. Hughey

Bonnie J. Hughey

5/20/97

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE: D/P
NAME: Young, David F.
STREET ADDRESS: 1500 San Remo Ave., Suite 245
CITY-ST-ZIP: Coral Gables, FL 33146-3054

TITLE: V
NAME: Young, Judith C.
STREET ADDRESS: 1500 San Remo Ave., Suite 245
CITY-ST-ZIP: Coral Gables, FL 33146-3054

TITLE: V/S/T
NAME: Hughey, Bonnie J.
STREET ADDRESS: 1500 San Remo Ave., Suite 239
CITY-ST-ZIP: Coral Gables, FL 33146-3047

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Bonnie J. Hughey

5/29/97 (305)662-9324

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Bonnie J. Hughey, Vice President/Secretary/Treasurer

Date

Daytime Phone #