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FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90041 019 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999

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

DOCUMENT # **490275**

1. Corporation Name
FAMILY BOARDING HOME, INC.

Principal Place of Business
c/o ALFONSO RODRIGUEZ, C.P.A.
6780 CORAL WAY SUITE 100
MIAMI, FLORIDA 33155

Mailing Address
c/o ALFONSO RODRIGUEZ
6780 CORAL WAY #100
MIAMI, FL. 33155

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 21. State Apt. #, etc.
 22. City & State
 23. Zip
 24. Country

2a. Mailing Address
 26. State Apt. #, etc.
 27. City & State
 28. Zip
 29. Country

3. Date Incorporated or Organized
01/30/84

4. FE Number
59-2412014

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. This corporation owes or has due the current year Intangible Personal Property Tax due June 30 ☒ **Yes** ☐ **No**

8. Name and Address of Current Registered Agent
SOFIA CARRATALA
1120 S.W. 19th AVENUE
MIAMI, FLORIDA 33135

9. Name and Address of New Registered Agent
 91. Name
 92. Street Address (P.O. Box Number is Not Accepted)
 93. City
 94. State
 95. 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, and I am authorized to accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Sofia Carratala **SOFIA CARRATALA, 6/2/99**

12. OFFICERS AND DIRECTORS

NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE
PRESIDENT:			
SOFIA CARRATALA	1120 S.W. 19th AVE.	MIAMI, FL. 33135	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE
11. NAME	12. STREET ADDRESS	13. CITY-STATE-ZIP	14. TITLE
15. NAME	16. STREET ADDRESS	17. CITY-STATE-ZIP	18. TITLE
19. NAME	20. STREET ADDRESS	21. CITY-STATE-ZIP	22. TITLE
23. NAME	24. STREET ADDRESS	25. CITY-STATE-ZIP	26. TITLE
27. NAME	28. STREET ADDRESS	29. CITY-STATE-ZIP	30. TITLE
31. NAME	32. STREET ADDRESS	33. CITY-STATE-ZIP	34. TITLE
35. NAME	36. STREET ADDRESS	37. CITY-STATE-ZIP	38. TITLE
39. NAME	40. STREET ADDRESS	41. CITY-STATE-ZIP	42. TITLE
43. NAME	44. STREET ADDRESS	45. CITY-STATE-ZIP	46. TITLE
47. NAME	48. STREET ADDRESS	49. CITY-STATE-ZIP	50. TITLE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607.0503, Florida Statutes, and that the information is true and correct. I am authorized to execute this report as required by Chapter 607, Florida Statutes, and I am authorized to accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Sofia Carratala **PRES. 4/19/99 (305) 662-1824**