


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 22 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L01327 (0)			
1. Corporation Name FAMILYHOOD INVESTMENT, INC.			
Principal Place of Business 8695 NW 66 STREET MIAMI FL 33166		Mailing Address 8695 NW 66 STREET MIAMI FL 33166-2670	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
3. Date Incorporated or Qualified 07/10/1989		3a. Date of Last Report 09/26/1996	
4. FEI Number 65-0132649		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
8. Name and Address of Current Registered Agent FOUCHE, DANIEL 11332 SW 73RD LANE MIAMI FL 33173		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS			
TITLE	PST / TREASURER	<input type="checkbox"/> DELETE	
NAME	FOUCHE, DANIEL		
STREET ADDRESS	8695 NW 66TH STREET		
CITY - ST - ZIP	MIAMI FL 33166		
TITLE	EVP	<input checked="" type="checkbox"/> DELETE	
NAME	FOUCHE ROUZIER, DEBORAH		
STREET ADDRESS	8695 NW 66TH STREET		
CITY - ST - ZIP	MIAMI FL 33166		
TITLE	VP	<input checked="" type="checkbox"/> DELETE	
NAME	MAURICE FOUCHE, DANIEL		
STREET ADDRESS	8695 NW 66TH STREET		
CITY - ST - ZIP	MIAMI FL 33166		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	VICE-PRESIDENT	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
1.2 NAME	JOCELYNE FLAMBERT FOUCHE		
1.3 STREET ADDRESS	8695 NW.66 STREET		
1.4 CITY - ST - ZIP	MIAMI, FL 33166		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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 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 29 if changed, or on an attachment with an address.			
SIGNATURE: <i>Daniel Fouche</i> 1/4/97 305-592-8188			

CR2E034 (9/96)