## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N08723 1. Corporation Name

Country

City & State

SIGNATURE:

Zip

Mailing Address
7331 CORAL WAY. SUITE 25( MIAMI FL 33155-8402
2a. Mailing Address
Suite, Apt. #, etc.

City & State

28

3. Date Incorporated or Qualifed 04/16/1985

5. Certificate of Status Desired

6. Election Campaign Financing

4. FEI Number 59-2558654 **FILED** 

03-09-1999 90137 029 \*\*\*\*61.25

Mar 09, 1999 8:00 am Secretary of State

4	25	29	30			Trust Fund Contri	bution		Added to Fe	es	
	9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent							
		81	Name								
	NASH, MARTIN P 7331 CORAL WAY, SUITE 250 MIAMI FL 33155			82	Street Address (P.O. Box Number is Not Acceptable)						
				83				·	·		
				84	City			FL	85 Zip Code	·	

Country

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE	Standard broad as sciented name of registered against	nd title if annicable (NOTE 6	Registered Agent signature red	ouired when reinstating)		DAT	Ē	<del></del> -	<del></del>	
12.	gnature, typed or printed name of registered agent and title if applicable. (NOTE: R)  OFFICERS AND DIRECTORS		gistered Agent signature required when reinstating)  DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I							
TITLE	D	☐ DELETE	1.1 TITLE					Change	☐ Addition	
NAME	GUZMAN, MAYRA		1.2 NAME				٠,٠	٠.		
STREET ADDRESS	561 NE 79TH STREET		1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP							
TITLE	DST	X DELETE	2.1 TITLE	DST				Change	<b>⊠</b> Xddition	
NAME	WALKER, BEKYE		2.2 NAME	Martin P.						
STREET ADDRESS	561 NE 79TH ST #219		2.3 STREET ADDRESS	7331 Coral					ļ	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	<u> Miami FL 3</u>	<u> 3155 -</u>					
TITLE	PD	₹ XELETE	3.1 TITLE			-		Change	☐ Addition	
NAME	LAFER, STEPHEN		3.2 NAME							
STREET ADDRESS	551 NE 79TH ST		3.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP							
TITLE	VPD	☐ DELETE	4.1 TITLE	PD	•	·.		Ş∰Şhange	☐ Addition	
NAME	PERALTA, RAPHAEL		4.2 NAME		•			•		
STREET ADDRESS	8010 NE 5TH AVE		4.3 STREET ADDRESS		•					
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP					<u></u>		
TITLE		☐ DELETE	5.1 TITLE		,	: .	. ·,	Change	Addition	
NAME			5.2 NAME	`,		``.	•	. :.	`.	
STREET ADDRESS			5.3 STREET ADDRESS			20.				
CITY-ST-ZIP			5.4 CITY-ST-ZIP	<u></u>	<u> </u>	2000	`			
TITLE		☐ DELETE	6.1 TITLE		: •	f 1.	· . ·	☐ Change	Addition	
NAME			6.2 NAME		, .	• :	٠.			
STREET ADDRESS			6.3 STREET ADDRESS							
CITY-ST-ZIP			6.4 CITY-ST-ZIP	in Continu 140 07/2\(ii) Ele	· · · · · · · · · · · · · · · · · · ·		•	<del> </del>		

hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i) indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the saidficer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE REQUIRED

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable