

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOCUMENT # **N12243** (4)
THE PHILIPPINE NURSES ASSOCIATION OF FLORIDA, INC.

Principal Office Address: 1590 NORTHEAST 162ND STREET #400 NORTH MIAMI BEACH FL 33162
Mailing Address: 1590 NORTHEAST 162ND STREET #400 NORTH MIAMI BEACH FL 33162

2. Principal Office of Directors: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

APPROVED AND FILED
NOV 1 1995
OFFICE OF THE CLERK
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified: 11/25/1985
3a. Date of Last Report: 07/14/1994
4. FID Number: 65-0037822
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Has this corporation been in the business of selling securities? \$5.00 May Be Added to Fees
7. Nonprofit with 1495 (501)(c)(3) Tax Exempt Status: \$68.75 Supplemental Fee Not Required
8. Has corporation been found to be an intangible tax under 1995 Florida Statutes? Yes No

9. Name and Address of Current Registered Agent
PRESLEY, MICHAEL R., ESQ.
888 S. ANDREWS AVE., SUITE 305
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent
B1 Name: _____
B2 Street Address (P.O. Box Number or Mail Acceptance): _____
B3 City: _____
B4 State: FL B5 Zip Code: _____

11. The undersigned, in the presence of the Board of Directors and 100% of the Florida Statutes, the above-named corporation, hereby certifies that the information furnished herein is true and correct and that the undersigned is duly authorized to execute this report as required by law.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS	13. OFFICERS AND DIRECTORS
T NENA, FORTE 12995 SW 188 ST MIAMI FL	PRESIDENT DAISY GIOCON, PH.D., APRN, RN 7350 SW 121 ST MIAMI FL 33156
S CHANCE, MARLENE 4381 SW 50TH ST FT LAUDERDALE FL	A. GIGI V. MOWEDA 1705 NE 27th Csw # 209 MIAMI, FL 33140
S LAZO, VICTORIA 11271 SW 176 ST MIAMI FL	
D COLIBAG, ELIZABETH 820 NE 171 ST N MIAMI BEACH FL	
D SIMPAO, FRANCES 7601 E TRAIL DR., #1222 N MIAMI BCH. FL	
D GONZALES, HELEN 16050 NE 18TH PLACE N. MIAMI BEACH FL	

14. I, the undersigned, certify that this information is submitted with the filing voluntarily furnished and does not qualify for the exemption of filing as required by Florida Statutes. I further certify that this information is included in the annual report or supplemental annual report as filed and is accurate and that my signature shall have the same legal effect as if made under oath. I am a director or officer of this corporation or the treasurer or the person authorized to execute this report as required by Florida Statutes, and that my name appears in Block A of Block C of the report or certificate filed with this address.

SIGNATURE: A. Gigi V. Moweda - Secretary 4/20/95 (205) 8949829