

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Aug 08 1997 8:00am
Secretary of State

DOCUMENT # N14427 (1)
1. Corporation Name
COUNCIL FOR BLACK ECONOMIC DEVELOPMENT, INC.



Principal Place of Business Mailing Address
2331 N. STATE ROAD 7 SUITE 106 LAUDERHILL FL 33313
2331 N. STATE ROAD 7 SUITE 106 LAUDERHILL FL 33313

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 3800 W. BROWARD BLVD		26 3800 W. BROWARD BLVD		04/16/1986		07/05/1996	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
				65-0023558		Not Applicable	
23 City & State		28 City & State		5. Certificate of Status Desired		8.75 Additional Fee Required	
23 FORT LAUDERDALE		28 FORT LAUDERDALE		<input type="checkbox"/>		<input type="checkbox"/>	
24 Zip		29 Zip		6. Election Campaign Financing		5.00 May Be Added to Fees	
24 33312		29 33312		Trust Fund Contribution		<input type="checkbox"/>	
25 Country		30 Country		8. This corporation owes or has paid the current year intangible		Personal Property Tax due June 30.	
				<input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THOMAS, ALDWIN MR. 1951 N.W. 85TH WAY PEMBROKE PINES FL 33024				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 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	DELETE		1.1 TITLE	PD	CHAIRMAN	
NAME	MCKINLEY, JAMES			1.2 NAME	GERALD WILCOX	Change Addition	
STREET ADDRESS	6555 POWERLINE RD #214			1.3 STREET ADDRESS	2331 N. STATE RD 7, SUITE 106		
CITY-ST-ZIP	FT LAUDERDALE FL 33309			1.4 CITY-ST-ZIP	LAUDERHILL, FL 33313		
TITLE	VD	DELETE		2.1 TITLE	1ST VICE CHAIRMAN	Change Addition	
NAME	ASH, ANTHONY D			2.2 NAME	ALDWIN THOMAS	Change Addition	
STREET ADDRESS	3500 S.W. 15TH ST.			2.3 STREET ADDRESS	3800 W. BROWARD BLVD		
CITY-ST-ZIP	FT. LAUDERDALE FL 33312			2.4 CITY-ST-ZIP	FORT LAUDERDALE, FL 33312		
TITLE	TD	DELETE		3.1 TITLE	2ND VICE CHAIRMAN	Change Addition	
NAME	WILCOX, GERALD			3.2 NAME	CHRISTOPHER HOOD	Change Addition	
STREET ADDRESS	2331 N. STATE ROAD 7, #108			3.3 STREET ADDRESS	8254 N.W. 14TH COURT		
CITY-ST-ZIP	LAUDERHILL FL 33313			3.4 CITY-ST-ZIP	FORT LAUDERDALE, FL 33324		
TITLE	SD	DELETE		4.1 TITLE	SECRETARY	Change Addition	
NAME	GILL, MARIE			4.2 NAME	ANTHONY ASH	Change Addition	
STREET ADDRESS	5950 W. OAKLAND PARK BLVD., #307			4.3 STREET ADDRESS	3500 S.W. 15TH STREET		
CITY-ST-ZIP	FT LAUDERDALE FL 33301			4.4 CITY-ST-ZIP	FORT LAUDERDALE, FL 33312		
TITLE		DELETE		5.1 TITLE	TREASURER	Change Addition	
NAME				5.2 NAME	FRANK MADEN	Change Addition	
STREET ADDRESS				5.3 STREET ADDRESS	5975 W. SUNRISE BLVD SUITE 207B		
CITY-ST-ZIP				5.4 CITY-ST-ZIP	PLANTATION, FL 33313		
TITLE		DELETE		6.1 TITLE		Change Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE SIGNATURE REQUIRED 7/25/97 (SIGNED) 307 4300

CR2E037 (4/97)