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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

N19495

(3)

Principal Plac PO BOX 14 830 NORTH HOMESTEAL	67 KROME AVENUE	CRIME, INC.	Mailing Address PO BOX 1467 B30 NORTH KROME HOMESTEAD FL 3X								_	
								 Date Incorporate 03/03/19 		3a. D	ate of Las 05/01/	
_2, Principal P 21	Place of Business		2a. Mailing Address			-		4. FEI Number	.04		L	Applied For
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					65-02058	24			Not Applicable
22			27					5. Certificate of State	us Desired			5 Additional Regulred
City & Stat	e		City & State					6. Election Campaig	n Financing			O May Be
Zip	Co	untry	Zip	Co	untry			Trust Fund Contr			Add	ed to Fees
24	25		29	30	c. y			This corporation I Florida Statutes		ntangible ta		s. 199.032,
	9. Name and A	dress of Current	Registered Agent				1	0. Name and Adde	ess of New R			
1141 -	10 140444				81	Name						
	NS, MICHAEL E.	AHIF			82	Street	Address	(P.O. Box Number is	Not Acceptab	le)		
	irth Krome ave Itead fl 33030	NUE			83			***	-1		-, -	
TOMEO	71EAD 1 E 30000											
					84	City				FL	85 Z	ip Code
or register familiar wi SIGNATURE	ith, and accept the ol	the State of Florida oligations of, Section	and 617.1508, Florida Stati I. Such change was author In 617.0503, Florida Statuti	rized by the oes.	corpo	oration's	board of	directors. I hereby a	ent for the purpocept the appo	oose of cha pintment as	inging its registered	registered office d agent. I am
	Signature, typed or printed r	ame of registered agent an	·	NOTE: Registered	d Agent	l signature i	required wher	reinstating)		DATE		
12.		ame of registered agent an OFFICERS AND	DIRECTORS	NOTE: Registered	d Agent	l signature i	required wher	n reinstating) ADDITIONS/CHAI	NGES TO OFFI	DATE CERS AND	DIRECTO	ORS IN 12
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oath; that I am an officer or director of the corporation or the receiver or trustee report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address. POUG INGRAM 4-15-8 305-247-3680
PICEH ON DIRECTOR

Delto Deptine Phone 8

SIGNATURE: