

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N22003 (0)

1. Corporation Name

IBO ASSOCIATION OF SOUTH FLORIDA (IGWE BU IKE) I
NC.

Principal Place of Business

Mailing Address

3474 NW 181ST ST.
MIAMI FL 33056

P.O. BOX 540712
OPALOCKA FL 33064



3. Date Incorporated or Qualified

08/12/1987

3a. Date of Last Report

03/31/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0046738

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AGHARAUMUNNA, MONDAY
3474 NW 181ST ST.
MIAMI FL 33056

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	ANAM, OSADEBE O	
STREET ADDRESS	19060 NW 57TH AVE.	
CITY - ST - ZIP	MIAMI FL 33015	
TITLE	VD	☒ DELETE
NAME	OGUGUA, CHARLES I	
STREET ADDRESS	496 NW 185TH ST., RD. #APR 214	
CITY - ST - ZIP	MIAMI FL 33169	
TITLE	SD	☒ DELETE
NAME	OJIYI, INGRAM	
STREET ADDRESS	1881 NW 42 TER., #307 F	
CITY - ST - ZIP	SUNRISE FL 33313	
TITLE	TD	☐ DELETE
NAME	OKORO, BATHOLOMEW	
STREET ADDRESS	1830 NE 167 ST., #11	
CITY - ST - ZIP	MIAMI FL 33162	
TITLE	SD	☐ DELETE
NAME	MENIRU, IBE E	
STREET ADDRESS	10871 SW 164TH ST.	
CITY - ST - ZIP	MIAMI FL 33157	
TITLE	D	☒ DELETE
NAME	ONYEABOR, PAUL	
STREET ADDRESS	9042 SW 97TH AVE.	
CITY - ST - ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	☒ Change ☐ Addition
1.2 NAME	VICTOR A. OPARAH	
1.3 STREET ADDRESS	1091 N.W. 46 AVENUE	
1.4 CITY - ST - ZIP	LAUDERHILL FL 33313	
2.1 TITLE	VICE PRESIDENT	☒ Change ☐ Addition
2.2 NAME	JUDE OSUJI	
2.3 STREET ADDRESS	15735 N.W. 158 STREET ROAD,	
2.4 CITY - ST - ZIP	MIAMI FL 33054	
3.1 TITLE	GENERAL SECRETARY	☒ Change ☐ Addition
3.2 NAME	EMEKA NWAHIRI	
3.3 STREET ADDRESS	20140 NW 57 COURT,	
3.4 CITY - ST - ZIP	MIAMI LAKES FL 33015	
4.1 TITLE	PUBLICITY SECRETARY	☐ Change ☒ Addition
4.2 NAME	CHARLES I. OGUGUA	
4.3 STREET ADDRESS	496 N.W. 165 ST., RD. APT. #218 D,	
4.4 CITY - ST - ZIP	MIAMI FL 33169	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	CULTURAL DIRECTOR	☒ Change ☐ Addition
6.2 NAME	CHRIS OKPALA	
6.3 STREET ADDRESS	20050 NW 65 COURT,	
6.4 CITY - ST - ZIP	MIAMI FL 33015	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE:

VICTOR A. OPARAH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 (954) 359-1333

Bank deposit \$70.00

CR2E037 (12/95)