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NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # N23042

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	TH DADE BENEVOLENT F				
Principal Place of Business C/O AINSLEE R. FERDIE 717 PONCE DE LEON BLVD. SUITE 215 CORAL GABLES FL 33134		Mailing Address C/O AINSLEE R. FERDIE 717 PONCE DE LEON BLVD. SUITE 215 CORAL GABLES FL 33134		TO SECULD TO BE SECULD THE SECULD STATE OF SECULDING STATE OF SECULDING STATES OF SECULDING SECU	
		CONNE GABLES FL	33134	3. Date Incorporated or Qualified 10/15/1987	3a. Date of Last Report
	Place of Business	2a. Mailing Address		4. FEI Number	02/03/1995 Applied For
Suite, Apt	#	26		59-2867097	Not Applicable
Suite, Apr.	. #, e tG.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Sta	te	Orty & State			Fee Required
3		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	This corporation has liability for intan	Added to Fees
4	25	29	30		igibie tax under s. 199,032, Yes
	9. Name and Address of Curi	rent Registered Agent		10. Name and Address of New Regis	stered Agent
			81 Name		
	, AINSLEE R.		82 Street A	ddress (P.O. Box Number is Not Acceptable)	
	INCE DE LEON BLVD.				
SUITE			83		
CURAL	GABLES FL 33134		84 City		85 Zip Code
OF TECHSIE			أوالتحاسين والمحاسب	poration submits this statement for the purpose	s or cumulating its redistered fullow
familiar w SIGNATURE	ith, and accept the obligations of, So Signature, typed or chilled name of regelered ag	ection 617.0503, Florida Statute	S. Oth Registered Agent signature req	ered on unrectors. Thereby accept the appointment	DATE
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SIGNATURE:

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