## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 21 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N23246

(4)

MIAMI MINI-CANES, INC.

SIGNATURE:

Principal Place of Business Mailing Address							
C/O HORACIO SIERRA 5035 SW 140TH CT. MIAMI FL 33175		C/O HORACIO SIERRA 5035 SW 140TH COURT MIAMI FL 33175-4815	5035 SW 140TH COURT MIAMI FL 33175-4815 US				
		US			3. Date Incorporated or Qualified 10/30/1987	10/30/1987 02/07/1996	
·····	face of Business	2a. Mailing Address			4. FEI Number Applied For Not Applied For		<del></del>
Suite, Apt.	# elc	26			00 00 10000		Not Applicable
22			27		5. Certificate of Status Desired		
City & State		City & State			6. Election Campaign Financing	<del></del>	0 May Be
23		28			Trust Fund Contribution		d to Fees
Zip	Country	Zip	Country	,	8. This corporation has liability for in		s. 199.032,
24	9. Name and Address of Cui		30	<del> </del>	Florida Statutes  10. Name and Address of New Reg	Yes No	
	9. Hamie and Addiess of Cul	Iour uedistelen wählir	81	Name	10. Name and Address of New Heg	istered Agent	
CICDDA	HUDYCIU		82				
SIERRA, HORACIO 5035 SW 104TH CT.				Street Add	dress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33175			83				
1714 4777 7 6			04	O't-		[22]	
			84	City		FL  85   Zi	p Code
11. Pursuant t	to the provisions of Sections 617.	0502 and 617.1508, Florida Statute	s, the above	e-named cor	poration submits this statement for the pution's board of directors. I hereby accept	rpose of changing	its registered
agent. I a	m familiar with, and accept the ob	oligations of, Section 617.0503, Flor	rida Statute:	ritie corpora S.	mon's board of directors, I hereby accept	the appointment a	as registered
SIGNATURE							
12,	Signature, typed or printed name of registered	d agent and title if applicable. (NOTE  AND DIRECTORS	Registered Age	ent signature requ	ired when reinstating)	DATE	200 141 40
TITLE	D	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Change	
NAME	SIERRA, HORACIO		1.2 NAME				יייייייייייייייייייייייייייייייייייייי
STREET ADDRESS	5035 SW 140TH CT.		1.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY - S				
TITLE	D	DELETE - 2				Change	e
NAME	SIERRA, MARIA		2.2 NAME				
STREET ADDRESS	5035 SW 140 CT		2.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL	- Contro	2. 4 CITY-1	ST-ZIP			
TITLE	D	DELETE	3.1 TITLE		,	☐ Change	e 🛄 Addition
NAME CARGET ADDRESS	SIERRA LYAN		3.2 NAME				
STREET ADDRESS	5035 S.W. 140 CT. MIAMI FL 33175		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP				
CITY-ST-ZIP TITLE	MIPMITE 33173	DELETE	4.1 TITLE	51-217		Change	e Addition
NAME			4. 2 NAME			Limit Strategy	
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	e Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY - ST - ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			L Change	e L Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET				
CITY-ST-ZIP 14. I do hereb	by certify that the information supp	blied with this filing does not qualify	6.4 CITY-S	motion state	d in Section 119.07(3)(i), Florida Statutes	I further certify th	at the
information	n indicated on this annual report :	or supplemental annual report is tru	ue and accu	rate and tha	at my signature shall have the same legal art as required by Chapter 617, Florida St	effect as if made u	under oath: that I

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR