

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90090 040 ****61.25

DOCUMENT # N30281

1. Entity Name
FIRE FIGHTERS MEMORIAL BUILDING CORPORATION



Principal Place of Business
**8000 NW 21ST ST.
STE. 222
MIAMI, FL 33122 US**

Mailing Address
**8000 NW 21 ST
SUITE 222
MIAMI, FL 33122-1605 US**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01102007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0193375

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HILLS, STANLEY
8000 NW 21 ST
SUITE 222
MIAMI, FL 33122**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME HILLS, STANLEY ☐ Delete
STREET ADDRESS 8000 NW 21ST ST., STE. 222
CITY-ST-ZIP MIAMI, FL 33122

TITLE Treasurer ☐ Change ☒ Addition
NAME Joaquin Delceto
STREET ADDRESS 8000 NW 21 St., #222
CITY-ST-ZIP Miami, FL 33122

TITLE VPD
NAME CRUZ, AL ☐ Delete
STREET ADDRESS 8000 NW 21 STREET, SUITE 222
CITY-ST-ZIP MIAMI, FL 33122

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME RAINEY, GARY ☐ Delete
STREET ADDRESS 8000 NW 21 STREET, SUITE 222
CITY-ST-ZIP MIAMI, FL 33122

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE COB ☒ Delete
NAME LOWE, STEVEN
STREET ADDRESS 8000 NW 21 STREET, SUITE 222
CITY-ST-ZIP MIAMI, FL 33122

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME GELBERT, MANNY
STREET ADDRESS 8000 NW 21 STREET, SUITE 222
CITY-ST-ZIP MIAMI, FL 33122

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME THOMPSON, MICHAEL
STREET ADDRESS 8000 NW 21 ST SUITE 222
CITY-ST-ZIP MIAMI, FL 33122

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Joquin del Ceto **Joquin del Ceto** 1/11/07 305-593-6100