FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

111 NW 1ST ST #655

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

MIAMI FL 33128

21

22

23

24

TITLE

NAME

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Zip

N30850

(4)

* DADE COUNTY LEGISLATIVE DELEGATION

MIAMI-DADE COUNTY DAYS,

Country

25

12-26A7

Principal Place of Business

Mailing Address

7800 RED ROAD #115

SOUTH MIAMI FL 33143

	00 0 102400	
2e. Mailing Address 26	5. Certificate of Status Desired	\$8.75 Ad Fee Req
Suite, Apt. #, etc.	Election Campaign Financing Trust Fund Contribution	\$5.00 Ma Added to F
City & State	7. Is this nonprofit corporation a homeowners association?	

City & State Zip

Country 30 9. Name and Address of Current Registered Agent

8. This corporation owes or has paid the current year Intangible

3. Date Incorporated or Qualified

02/20/1989

65-0102405

4. FEI Number

Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

FILED

Apr 13 1998 8:00am

Secretary of State

rii la Maaan dhalla aa dhalla aa dhalla dhaan nar aa an na aa ah dhalla dhaan dha aa ah dha aa dhalla dhalla d

Yes No

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

COSGROVE, JOHN 201 W FLAGLER ST MIAMI FL 33130

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City B5 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.

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

12

	Signature, typest or politice transcer registered agent and title it applicable	(MOLE, Higheraged Whell e-flustrie rec
12.	OFFICERS AND DIRECTORS	13.
TITLE	D	DELETE 1.1 TITLE
NAME	COSGROVE, JOHN	1.2 NAME
STREET ADDRESS	201 W FLAGLER ST	1.3 STREET ADDRESS

28

29

MIAMI FL 1.4 CITY - ST - ZIP DELETE 2.1 TITLE **BLOOM. ELAINE** 2.2 NAME 300 71 ST., #504 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP

DELETE

DELETE

DELETE

DELETE

MIAMI BEACH FL GILLMAN, JEFFRY 7800 RED ROAD. #115 S. MIAMI FL

RAULSON, DIANNE 8311-A S.W. 107TH AVENUE

MIAMI FL CITY-ST-ZIP TITLE NAME STREET ADDRESS

CITY-ST-ZIP TITLE NAME STREET ADDRESS

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 an attachmout with an address.

Jeffry Gillman 4/3/98

***61.25

305-661-0303

Addition

Addition

☐ Change ■ Addition

☐ Change

Change

Change ■ Addition

51001124933**2G**iange -04/14/98--01070--007

> Change Addition

SIGNATURE: