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NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Apr 08 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

(6)

DADE COUNTY POLICE BENEVOLENT ASSOCIATION LOUNGE RESTAURANT INC.

/HEOI/	AUMANT, INC.								
Principal Place of Business Mailing Address									AFARI AIEII IAAI
10680 NW 25TH ST. SUITE 100 MIAMI FL 33172		10680 NW 25TH ST. Suite 100 Miami Fl. 33172-2155			9 Data Laurent La Ou l'étable	Ta			
						3. Date Incorporated or Qualified 09/11/1989		te of Last 04/09/19	
2. Principal F	Place of Business	2a. Mailing Address	2a. Malling Address			4. FEI Number 65-0152024	-1	- +-	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				Certificate of Status Desired			Not Applicable Additional
22 City & Stat	Δ	City & State						Required	
23	.0	28 City & State				Election Campaign Financing Trust Fund Contribution			May Be d to Fees
Zip	Country	Zıp	Country	y		8. This corporation has liability for I			
24	25 9. Name and Address of Currel				Florida Statutes Yes No 10. Name and Address of New Registered Agent				
· · · · · · · · · · · · · · · · · · ·	g. Hambana Addition of Conto	in negistered Agent	81	Τ	Name	10. Name and Address of New Re	Jistered A	.gent	
RIVERA,	JOHN		82	-	Strool Adds	ress (P.O. Box Number is Not Acceptab	la)		
10680 N	W 25TH STREET, SUITE 100				Street Addit	ess (F.O. Box Number is Not Acceptab	10)		
MIAMI F	L 33172		83						
			84	1	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statute	s, the above	L	named corp	poration submits this statement for the p	urpose of	changing	its registered
agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	∋ of Florida. Such change was a jations of, Section 617.0503, Flo	uthorized by rida Statutes	y t s	he corporati	poration submits this statement for the pricion's board of directors. I hereby accep	t the appo	intment as	s registered
SIGNATURE .									
12,	Signature, typed or plinted name of registered agr	ion and title if applicable. (NOTE ID DIRECTORS	: Registered Age	ent	signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDG ANITY	DIDECTO	DC IN 12
TITLE	P	DELETE	1.1 TITLE			ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	RIVERA, JOHN		1.2 NAME				-		
STREET ADDRESS	10680 N.W. 25TH ST. #100		1.3 STREET	I AE	DDRESS				
CITY-ST-ZIP	MIAMI FL	Florier	1.4 CITY-S	31-	ZIP				
TITLE Name	D D	☐ DELETE	2.1 TITLE				ı	Change	Addition
STREET ADDRESS	CLARKE, JOAN 10680 NW 25 STREET		2.2 NAME 2.3 STREET ADDRESS		DODECC				
CITY-ST-ZIP	MIAMI FL		2.4 City-S1-ZiP			14 ·			
TITLE	D			3.1 701.8			[Change	Addition
NAME	DELGADO, JOHN		3.2 NAME					-	
STREET ADDRESS	10680 N.W. 25TH ST. #100		3.3 STREET	AD	DDRESS				
CITY-ST-ZIP	_		3.4. CITY-S	3.4. CITY-ST-ZIP					
TITLE	D COLORDON PROLLED	☐ DELETE	4.1 TITLE				[Change	Addition
NAME .	KOLODGY, RICHARD		4. 2 NAME						
STREET ADDRESS	10680 N.W. 25TH ST. #100 MIAMI FL		4.3 STREET						
CITY-ST-ZIP TITLE	T T	DELETE	4.4 CITY - ST 5.1 TITLE	1-4	ZIP			Change	Addition
NAME	CHRISTIAN, PEGGY J	_ veet	5.2 NAME					Criange	L Addition
STREET ADDRESS	10680 N.W. 25TH ST. #100		5.3 STREET	ΑĐ	ODRESS				
CITY-ST-ZIP	MIAMI FL		5.4 CITY- \$1						
TITLE		☐ DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE1	AD	DRESS				
CITY-ST-ZIP	ordity that the information according	of trail date dillion of the trail of the	6.4 CITY-ST	1-2	ZIP	1.0.000			
I am an of	ficer or director of the corporation of	of with this filling does not qualify supplemental annual report is tru hie receiver or trustee empowe on an attachment with an addri	red to execu	m¢ ute	otion stated ite and that r e this report	in Section 119.07(3)(i), Florida Statutes my signature shall have the same legal as required by Chapter 617, Florida Sta	I further of effect as it atutes; and	erlify that f made und that my r	the der oath; that name