FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

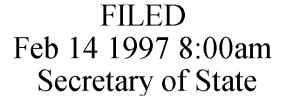
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N35503

(4)

MIAMI SOCIETY, GROUP 3036 POLISH NATIONAL ALLIAN CE

Mailing Address





1250 NW 22ND AVE. MIAMI FL 33125			9141 FROUDE AVE MIAMI BEACH FL 33154-3115								
							3. Date Incorporated or Qualified 12/05/1989		ate of Last R 01/31/198		
2. Principal P	lace of Business	2a. M	ailing Address			· · · · · · · · · · · · · · · · · · ·	4. FEI Number	.1	A	plied For	
21		26					NOT APPLICABLE		No	t Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		26	4			6. Election Campaign Financing Trust Fund Contribution S5.00 May Be Added to Fees					
Z ip 24	25 29 30				8. This corporation has liability for intangible tax under s. 199 Florida Statutes Yes No				. 199.032,		
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
					11 1	Name					
BRZESKI, EUGENIA 9141 FROUDE AVE					Street Address (P.O. Box Number is Not Acceptable)						
%MIAMI SOCIETY GR. 3036 P.N.A.					33						
MIAMI BI	EACH FL 33154				14	City		FL	65 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.											
SIGNATURE ,											
12.	Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13.					ered Agent signature required when reinstating) DATE 3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	PT	3 AND DIRECTO	DELETE	1.1 TØL	E.		ADDITIONS/OFFAINGES TO OFFIC	אין פרויי	Change	Addition	
NAME	SIMS, IRENE			1.2 NAN]	
STREET ADDRESS	ARABE AR AUF ART HOOK				1.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI BEACH FL				1.4 CITY - ST - ZIP		.7				
TITLE	V Τ		DELETE	2.1 TITL	E	V	MALINOWSKi, Josi	c n u	Change	Addition	
NAME	KASPER, JEANE	· / .	ص ل	2.2 NAM	ŧE		1012 N E 116 AUE	SP P			
STREET ADDRESS	17300 NE 19TH ST.		0.0	2.3 STRI	EET AD	DDRESS	MIAMI, FL 3316)			
CITY-ST-ZIP	N MIAMI BEACH FL		T DECEME	2. 4 CIT		ZIP	WITHINI PC 3316		Charge	- Addison	
TITLE	ST STEEL SUCCES		☐ DELETE	3.1 TITL					Change	Addition	
NAME	Brezeski, Eugenia 9141 froude ave			3.2 NAM			•			}	
STREET ADDRESS	MIAMI BEACH FL 33154			3.3 STA						İ	
CITY - ST - ZIP TITLE	MIMMI DEACTIFE 33 134		DELETE	3.4. CIT 4.1 TITL		ZIP			Change	Addition	
NAME	l.			4.2 NA	-	1			-راسان		
STREET ADDRESS				4.3 STR		ODRESS					
CITY-ST-ZIP				4.4 CITY							
TITLE	, , , , , , , , , , , , , , , , , , ,		DELETE	51 TITL					Change	☐ Addition	
NAME				5.2 NAN	Æ						
STREET ADDRESS				5.3 STR	EET AC	DDRESS					
CITY-ST-ZIP				5.4 CITY	- <u>ST</u> -	ZIP					
TiTLE			DELETE	6.1 TITL	E				Change	Addition	
NAME				6.2 NAM	AE.						
STREET ADDRESS				6.3 STR	EET AL	DDRESS				1	
CITY - ST - ZIP				6.4 CITY	/- \$T-	ZIP					

I do hereby certify that the information supplied with this filling 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 on an attachment with an address.

02-12-1997 · Dayline Phone * 0030811