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FILED

May 19 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N37875 (4)

1. Corporation Name

MIRIAM VOCATIONAL SCHOOL, INC.

Principal Place of Business

135 SW 57TH AVE  
MIAMI FL 33144

Mailing Address

135 SW 57TH AVE  
MIAMI FL 33144-3411



2. Principal Place of Business

21 SAME

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

3. Date Incorporated or Qualified

04/27/1990

3a. Date of Last Report

07/11/1996

4. FEI Number

59-2639830

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CARO, PAUL  
8540 SW 133RD AVE RD. APT. 119  
MIAMI FL 33183

10. Name and Address of New Registered Agent

81 Name

OLGA A. FREDI

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

5841 SW 73rd Ave

83

MIAMI, FL. 33143

84 City

MIAMI

FL

85 Zip Code

33143-1874

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD ☐ DELETE

NAME ODRIA, ALFRED R.  
STREET ADDRESS 13575 SW 48 TERR  
CITY-ST-ZIP MIAMI FL 33175

TITLE VD ☐ DELETE

NAME ODRIA, MIRIAM  
STREET ADDRESS 13575 SW 48 TERR  
CITY-ST-ZIP MIAMI FL 33175

TITLE ST ☒ DELETE

NAME CARO, PAUL  
STREET ADDRESS 8540 SW 133RD AVE, RD. #119  
CITY-ST-ZIP MIAMI FL

TITLE V.P. / FINANCE ☐ DELETE

NAME OLGA A. FREDI  
STREET ADDRESS 5841 SW 73rd Ave  
CITY-ST-ZIP MIAMI, FL. 33143

TITLE Felix MAY ☒ DELETE

NAME 3245 VIRGINIA ST.  
STREET ADDRESS COCONUT GROVE, FL 33133  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby 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 on an attachment with an address.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-02-97

Date

Daytime Phone # 0030216

CR2E037 (9/96)