FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Sep 10 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # N3835. VE AFRICAN-AMERICAN RO	` '			
Principal Place	e of Business	Mailing Address			
1895 N.W. 75TH STREET IMIAMI FL 33147 US		1895 NW 75TH STREET MIAMI FL 33147-6136			
				3. Date Incorporated or Qualified 05/29/1990	3a. Date of Last Report 08/12/1996
Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0343052	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Country	Trust Fund Contribution	Added to Fees
Zip 24	25	Zip 29	Country 30	This corporation has liability for Florida Statutes	r intangible tax under s. 199.032, □ Yes □ No
	9. Name and Address of Curren			10. Name and Address of New R	
			61 Name		
WEATHERSPOON, HENRY			82 Street Ad	ddress (P.O. Box Number is Not Accepta	(ble)
1895 NW 75 ST					·
2100 NW			83		
MIAMI FI	L 33147		84 City		FL 85 Zip Code
office or re	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was a	uthorized by the corpo	orporation submits this statement for the tration's board of directors. I hereby acceptable	purpose of changing its registered
SIGNATURE					
12,	Signature, typed or printed name of registered ago OFFICERS AND	··-	Registered Agent signature re	aquired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE
TITLE	PT OFFICERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	WEATHERSPOON, HENRY	-	1.2 NAME		_ • _ ·
STREET ADDRESS	2100 NW 80TH ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST - ZIP		
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	RICH, EARL		2.2 NAME		
STREET ADDRESS	75 NW 42ND ST		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	CLINSCALES, D.		3.2 NAME	٠.	, 2 0 0 2 0 2 0 0 0 0 0 0 0 0 0 0 0 0 0
STREET ADDRESS	6250 NW 173 ST., #130		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI SPRING FL		3.4. CITY+ST-ZIP		
TITLE	ST	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	OWENS, SHERMAN		4. 2 NAME		
STREET ADDRESS	1895 NW 75 ST		4.9 STREET ADDRESS		
CITY-ST-ZIP TITLE	MJAMI FL	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		becare	5.2 NAME		_ onlings _ resilion
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	\ \		6.3 STREET ADDRESS		
CITY-ST-ZIP	ov codify that the information averalise	Light this filing does not assets.	6.4 CITY-ST-ZIP	tad in Section 119 07/2V/\ Elevide Statut	se I further certify that the
Informatio I am an of appears in	by county may the information supplied in Indicated on this annual report or s fficer or director of the corporation or in Block 12 or Block 13 if changed, or	upplemental annual report is vi- the receiver or trustee empoye on an attachment with an addr	no the exemption state and accurate and the red to execute this repress.	ted in Section 119.07(3)(i), Florida Statut hat my signature shall have the same leg port as required by Chapter 617, Florida	as if made under oath; that Statutes; and that my name