FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N39005

(6)

DO THE RIGHT THING OF MIAMI, INC.

<i>50</i> mil	E IIIGITI TIIIIG OF MINI	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Principal Place of Business		Mailing Address			TEE MANNEY MAAN HERMAN NAMEN NEGAL NEGAL ENGL	
% DONALD WARSHAW 400 N.W. 2ND AVE. MIAMI FL 33128-1706		% DONALD WARSHAW 400 N.W. 2ND AVE. MIAMI FL 33128-1706				
		·			3. Date Incorporated or Qualified 07/10/1990	3a. Date of Last Report 01/31/1996
Principal Place of Business The Principal Place of Business The Principal Place of Business		2a. Mailing Address 26		4. FEI Number 65-0207781	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country		This corporation has liability for it	Added to Fees
24	25	29	30			Yes No
••• *• · · · · · · · · · · · · · · · · ·	9. Name and Address of Curre	ant Registered Agent		······································	10. Name and Address of New Reg	platered Agent
			81	Name		
	iw, donald . 2nd avenue		82	Street Addr	ress (P.O. Box Number is Not Acceptab	le)
MIAMI FL			83			
			84	,		FL 85 Zip Code
	to the provisions of Sections 617.05 agistered agent, or both, in the Stal m familiar with, and accept the obli	i02 and 617.1508, Florida Statute of Florida. Such change was igations of, Section 617.0503, F	utes, the above authorized by Florida Statutes	e-named corp y the corporat s.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered
SIGNATURE _	Signature, typed or printed name of registered a	igent and title if applicable. (NC	OTE: Registered Age	ant signature requir	red when reinstating)	DATE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	☐ DELETË	1.1 TOTLE			☐ Change ☐ Addition
NAME	BELLAMY, ANGELA		1.2 NAME			
STREET ADDRESS	400 N.W. 2ND AVENUE		1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL	☐ DELETE	1.4 CHTY-S	IT-ZIP	***	1 1 At 1 1 At 1800
TITLE			2.1 TITLE			Change Addition
NAME STREET ADDRESS	Warshaw, Donald 400 N.W. 2nd Avenue		2.2 NAME	4000000		,
CITY-ST-ZIP	MIAMI FL		2.3 STREET 2. 4 City-5			
TITLE	PD	DELETE	3.1 TITLE	51-ZIF		Change Addition
NAME	SANCHEZ, FRANK J.		3.2 NAME			
STREET ADDRESS	4000 SE FINANCIAL CENTE	R	3.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL		3.4. CITY-5	ST-ZIP		
TITLE		DELETE	4.1 TITLE	***************************************		Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S	T-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY - S	T-ZIP		The Charles of the Control of the Co
TITLE NAME		T DETELE	6.1 TITLE			Change
STREET ADDRESS			62 NAME	ADDATES		
			6.3 STREET			
14. I do hereb	ov certify that the information suppli	ed with this filing does not gue	6.4 CITY-S	mntion stated	d in Section 119.07(3)(i), Florida Statutes	I further certify that the
information Lam an off	n indicated on this annual report or fficer or director of the corporation	r supplemental annual report is	s true and accu owered to exec	Jirate and that	t my signature shall have the same legal rt as required by Chapter 617, Florida Si	l affect as if made under eath: that

SIGNATURE:

TO AND TYPES OF PRINTED NAME OF SIGNIFIC OFFICER OF PROFESSION

2/7/97

305-579-2344

FILED

Feb 13 1997 8:00am

Secretary of State

Daytime Phone # Arvancas

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