

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **N48174** (9)

1. Corporation Name

PI KAPPA ALPHA GAMMA OMEGA HOUSING AND ALUMNI ASSOCIATION, INC.

Principal Place of Business

Mailing Address

7446 SW 54 AVE
MIAMI FL 33143
US

7446 SW 54 AVE
MIAMI FL 33143
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/02/1992

3a. Date of Last Report

10/13/1994

4. FEI Number

65-0355421

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 701 Brickell Ave.

26 701 Brickell Ave.

Suite, Apt., etc.

Suite, Apt., etc.

22 Ste. 1900

27 Ste. 1900

23 Miami, FL

28 Miami, FL

24 33131

Country U.S.A.

29

Country U.S.A.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status

\$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199 (199 Florida Statutes) ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GUTIERREZ, NICOLAS J. JR.
7446 SW 54 AVE
MIAMI FL 33143

81 Name GUTIERREZ, JR., ESQ., NICOLAS J.
82 Street Address (P.O. Box Number is Not Acceptable)
701 BRICKELL AVE
83 STE. 1900
84 City MIAMI FL 85 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Nicolas J. Gutierrez, Jr., Esq., Secretary/President - Nicolas J. Gutierrez, Jr. DATE 4/10/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DS
NAME	GUTIERREZ, NICOLAS J. JR.
STREET ADDRESS	7446 SW 54 AVE
CITY, ST, ZIP	MIAMI FL 33143
TITLE	D
NAME	KRALL, PETER A.
STREET ADDRESS	13300 SW 109TH PL.
CITY, ST, ZIP	MIAMI FL
TITLE	D
NAME	LARSON, RAYMOND M.
STREET ADDRESS	30855 SW 205 AVE
CITY, ST, ZIP	MIAMI FL 33030
TITLE	DP
NAME	MENDELSBERG, SCOTT W.
STREET ADDRESS	8208 SW 81ST TERRACE
CITY, ST, ZIP	MIAMI FL
TITLE	D
NAME	O'STEEN, SCOTT
STREET ADDRESS	8045 SW 107TH AVENUE
CITY, ST, ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11 TITLE	S/D	☒ Change ☐ Addition
12 NAME	GUTIERREZ, JR., ESQ., NICOLAS J.	
13 STREET ADDRESS	701 BRICKELL AVE, STE. 1900	
14 CITY, ST, ZIP	MIAMI, FL 33131	
21 TITLE	D	☒ Change ☐ Addition
22 NAME	KRALL, PETER A.	
23 STREET ADDRESS	13300 SW 109TH PL.	
24 CITY, ST, ZIP	MIAMI, FL	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP		
41 TITLE	P/D	☒ Change ☐ Addition
42 NAME	MENDELSBERG, SCOTT W.	
43 STREET ADDRESS	8208 SW 81ST TERR.	
44 CITY, ST, ZIP	MIAMI, FL 33143	
51 TITLE	D	☒ Change ☐ Addition
52 NAME	O'STEEN, SCOTT	
53 STREET ADDRESS	8045 SW 107TH AVE.	
54 CITY, ST, ZIP	MIAMI, FL 33173	
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption provided in Section 110.07(3)(b), 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: Nicolas J. Gutierrez, Jr., Esq., Secretary/President DATE 4/10/95 (305) 789-2152