FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	DIVISION OF	CORPORATIO	INS			
DOCU	MENT # N4866	62 (3)					
	R'S COUNCIL OF NORTH I	` ,					
10121	TO COUNTIE OF MORNING	AIIMAIN DENOM, INC.)	D INDI BADA DIBN DIBN	A BUBUK BABUK BUBUK 1884
Principal Place	e of Business	Mailing Address					
1520 NE 152 North Mian	ND TER AI BEACH FL 33162	1520 NE 152ND TER NORTH MIAMI BEACH	FL 33162				
					3. Date Incorporated or Qualified 05/01/1992		Last Report)6/1995
. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	02/0	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			59-2491274		Not Applicab 3.75 Additional
Catal & State		27			5. Certificate of Status Desired		Fee Required
Crty & State	e	City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be
Zip	Country	Zιρ	Country		8. This corporation has liability for	intangible tax und	Added to Fees der s. 199.032,
	9. Name and Address of Curre	29 ent Registered Agent	30		Florida Statutes 10. Name and Address of New F	Yes No	•
			81	Name	70. 112110 0110 11010 01 11011	iogistored Agen	
	CRAWFORD		82	Street Addr	ess (P.O. Box Number is Not Acceptat	ole)	
	152ND TERRACE		83				
N MIAMI	BEACH FL 33162-1272						
			84	City		FL 85	Zip Code
				amed corpora	ation submits this statement for the purid of directors. I hereby accept the app		Jits registered office
familiar wit	th, and accept the obligations of, Sec	ction 617.0503, Florida Statutes	ea by the corpo	ration's boar	d of directors. I hereby accept the app	bintment as regist	ered agent. I am
GNATURE .	Signature, typed or printed name of registered age:	thend the discourable (NO)	TE: Registered Agent				
2.		ND DIRECTORS	13.	signature required	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRE	CTORS IN 12
LE	P	DELETE	1.1 THILE			Cha	
ME	WHITE, OTHA		1.2 NAME		•		_
REET ADDRESS	1482 NE 152 TERR Morth Miami Beach Fl		1 3 STREET A	I .	Mary Dags		
Y-ST-ZIP LE	MONTH MIXINI DEACH FL	DELETE	1.4 CITY - ST- 2 1 TITLE	ZIP	Vice PRes.	Cha	nge Addition
ME .	BRENDA J. WASHINGTON	X	22 NAME	3	separin PRATT	_	ilde [2] Addition
EET ADDRESS	1590 NE 152ND ST		23 STREET A	.DDRESS	1550 NE 1548		
Y-ST-ZIP	NORTH MIAMI BEACH FL 33		2 4 CITY-ST		VORTH MIAMI	EACH,	FL 33/6
.E ME	EVER, WHIRELY	DELETE	3 1 TITLE	4	SECRETARY	☑ CHa	nge 🔲 Addition
EET ADORESS	1532 NE 152ND STREET	•	3.2 NAME 3.3 STREET A	DDOESC A	ATHENIA DOH	M	
r-ST-ZIP	NORTH MIAMI BEACH FL 33	162	3.4 CITY-ST	- ZIP	1450 NE 14957	<u>. </u>	22//:/
E	1	DELETE	4.1 TITLE		PATHENIA DOH 1450 NE 14987 VORTH MINNI BERN	Chaff Cha	nge Addition
IE	LELIA, SNELL		4. 2 NAME		.	77, -	
EET ADORESS	1545 NE 152ND TERR.		43 STREET A				
(-ST-ZIP E	NORTH MIAMI FL 33161 D	DELETE	44 CHY+ST- 51 THILE	ZIP			one Fladdies
1E	CRAWFORD, HAZEL		52 NAME			L] Una	nge 🔲 Addition
EET ADDRESS	1520 NE 152ND TERRACE		53 STREET A	DDRESS			
'-ST-ZIP	NORTH MIAMI BEACH FL 33		5 4 CITY-ST-	ZIP			
E	D MADY MORADIEV V DO	DELETE	6 1 TITLE			☐ Char	nge 🔲 Addition
ie Eet address	MARY, MCFARLEY K DR. 15350 NE 16TH AVE		6 2 NAME	DDDCCC			
Y-ST-ZIP	NORTH MIAMI BEACH FL 33	162	6 3 STREET AL	7IP			
I do hereb	v certify that the information supplied	with this filing is voluntarily furni-	shed and done	not qualify fo	r the exemption stated in Section 119.	07(3)(k), Florida S	tatutes. I further
oath; that I	am an officer or director of the corporate	oration or the receiver or trustee	iai report is true e emnowered to		e and that my signature shall have the report as required by Chapter 617, Flo		
abbeats IU	Block 12 or Block 13 if a ged or	union attachment with an addre	ess.			101	,
IGNAT		a vacue	- MA	ta II	HITE 4-9	-46	
	SIGNATURE AND TYPED O	R PRINTED NAME OF SIGNING OFFICE	R OR DIRECTOR		Date	Daytme Pt	none #