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FILED
May 14 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N93000005032 (8)

1. Corporation Name

VISION TO VICTORY HUMAN SERVICES CORPORATION



Principal Place of Business

Mailing Address

8400 N.E. 2ND AVE.
MIAMI FL 33138
US

P.O. BOX 381726
MIAMI FL 33238-1726
US

3. Date Incorporated or Qualified

11/03/1993

4. FEI Number

65-0449670

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRYANT, MAE D
8400 N.E. 2ND AVE.
C/O NEW BIRTH BAPTIST CHURCH
MIAMI FL 33138

81 Name

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

83

84 City

FL

85

Zip Code

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 to 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)

4/15/98
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE C
NAME JONES, ROSA DR
STREET ADDRESS 17000 NW 67TH AVENUE #210
CITY-ST-ZIP MIAMI FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D
NAME RUTLEDGE, PIERRE
STREET ADDRESS 798 NW 55TH STREET
CITY-ST-ZIP MIAMI FL 33187

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D
NAME DAWSEY, ANTHONY
STREET ADDRESS 8021 NE 7TH AVENUE
CITY-ST-ZIP MIAMI FL 33138

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D
NAME PRICE, JOSEPH
STREET ADDRESS 13223 SW 111TH TERRACE #4
CITY-ST-ZIP MIAMI FL 33186

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME IVORY, WILLIE
STREET ADDRESS 13001 NW 17TH COURT
CITY-ST-ZIP MIAMI FL 33187

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ED
NAME FISHBURNE, GEORGE
STREET ADDRESS 13230 N.W. 7TH AVENUE
CITY-ST-ZIP MIAMI FL

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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

4/9/98

CR2E037 (10/97)