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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 N94000000080 (1) DOCUMENT #

OAKLAND GROVE NEIGHBORHOOD IMPROVEMENT ASSOCIATI

FILED May 20 1997 8:00am Secretary of State



Principal Place of Business										51 8) (611) 610) (1
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8325 N.E. 3 AVE. MIAMI FL 32138		8325 N.E. 3 AV MIAMI FL 33138								
							3. Date incorporated or Qualified 01/07/1994		te of La 06/20	st Report /1996
2. Principal Place of Busines	s	2a. Malling Add	dress			,	4. FEI Number			Applied Fo
21		26				,	65-0526489		L_	Not Applic
Suite, Apt. #, etc.		Suite, Apt.					5. Certificate of Status Desired			75 Additions e Required
City & State		City & State	9			:	Election Campaign Financing Trust Fund Contribution			00 May Be
Zip	Country	Zip		Cour	ntry		8. This corporation has liability for i			ler s. 199.03
			29 30			·	Florida Statutes Yes No			
9. Name ar	d Address of Current	Registered Agent	<u> </u>		81	Name	10. Name and Address of New Re	gistered i	Agent	
				\big	0'	Name				
BRUTUS, PHILLIP J				Ī	62	Street Addre	ess (P.O. Box Number is Not Acceptab	le)	**	·
· 7900 NE 2ND AVE					83				····	
SUITE 600	p			[
MIAMI FL 33138					B4	City		FL	85	Zip Code
41. Pursuant to the provision	s of Sections 617.0502	and 617.1508, Flo	rida Statutes	the ab	OVE-I	named corpo	pration submits this statement for the p	urpose of	changi	ng its register
agent. I am familiar with,	and accept the obliga-	tions of, Section 61	7.0503, Flori	da Statu	ites.	IIIO COI POTATIC	on's board of directors. I hereby accep	y trib app	CHILITIO	ir tra i d'Aleron
SIGNATURE									,	·
Signature, typed or	orinted name of registered agen OFFICERS AND		(NOTE: I	Registered	Agent	signature require	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DIDEC	TOPS IN 12
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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.