FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**

1997

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N94000001140 (2)

LUBIN'S MUSEUM OF CARRIBEAN ART, INC.

Principal Place of Business Mailing Address						L FOR HARD THE IBEN BOOK BOOK BOOK BOOK BOOK INDIVIDUAL FOR A STANDARD FOR A STAN
7816 N.E. 2ND MIAMI FL 83138		7816 N.E. 2ND AVENUE MIAMI FL 33138-4805				
						3. Date Incorporated or Qualified 3a. Date of Last Report 08/07/1996
2. Principal Pi	ece of Business	2a. Mailing Address				4. FEI Number 65-0684 Applied For
21	, 	26	- 			APPLIED FOR O2 Not Applicable
Suite, Apt.	#, 0 1C.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip 24	Country	Zip				This corporation has liability for intangible tax under s. 199.032, Florida Statutes
24	25 9. Name and Address of Curren	[29] I Registered Agent	[30]	Τ		10. Name and Address of New Registered Agent
				81	Name	
LUBIN, N		4		82	Street A	Address (P.O. Box Number is Not Acceptable)
7818 N.E. 2ND AVENUE Miami Fl 33138				63		
MIAMI P	L 33138					
				84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-name					-named o	corporation submits this statement for the purpose of changing its registered
office of fi agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change witions of, Section 617.0503	vas authorize 3, Florida Šta	a by lutes.	the corp	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	2.					
12.	Signature, typed or kinted name of registered age OFFICERS AND		(NOTE: Registere 13.	d Ager	nt signature r	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD	DELETE		1.1 TITLE		Change Addition
NAME	LUBIN, MICHAEL		12 N			
STREET ADDRESS	7816 N.E. 2ND AVENUE		13:		ADDRESS	
CITY-ST-ZIP	MIAMI FL 33138			ITY-ST	r-ZIP	
TITLE	VP0	DELETE	2.1 To	2.1 TITLE		☐ Change ☐ Addition
NAME	ST. PREUX, ELISEE		2.2 N	AME		
STREET ADDRESS	7816 N.E. 2ND AVENUE		23 \$1		ADDRESS	
CITY-ST-ZIP	MIAMI FL 33138			HTY-S	T-ŽIP	
TITLE	8D	☐ DELETE	-,-	3,1 TITLE		☐ Change ☐ Addition
NAME			AME			
STREET ADDRESS 7816 N.E. 2ND AVENUE					ADDRESS	
CITY-ST-ZIP TITLE	MIAMI FL 33138	DELETE		TIF	I - ZIP	Change Addition
NAME		يا مددار	4.2 N			Change L. Austrion
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 City-St-Zip			
TITLE		DELETE				Change Addition
NAME			52 N	AME		
STREET ADDRESS			5,3 S	IREET /	ADDRESS	
CITY-ST-ZIP				ITY-ST	-21P	
TITLE		DELETE	6.1 T	TLE		Change Addition
NAME			6,2 N	AME		

in Section 119.07(3)(i), Florida Statules. I further certify that the my objecture shall have the same legal effect as if made under oath; that refuured by Chapter 617, Florida Statutes; and that my name 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption states information indicated on this annual report or supplemental annual report is true and accurate and the I am an officer or director of the corporation or the receiver or trustee empowered to execute this report appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6,3 STREET ADDRESS

6,4 CITY-ST-ZIP

FILED May 09 1997 8:00am Secretary of State

