FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90091 003 ***150.00

FILED

DOCUMENT # N9400005475

THE CEJAS FAMILY FOUNDATION, INC.

Principal Place of Bus
420 LINCOLN RD
STE 432
MIAMI BCH FL 33139
LIC

Mailing Address 420 LINCOLN RD STE 432 MIAMI BCH FL 33139

						1			•		
Principal Place of Busin	ness		Mailing Address				3.	Date Incorporated or Qualifed 11/03/1994		-	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			-			-	-	Applied For Not Applicable
City & State			City & State				5.	Certifcate of Status Desired			75 Additional ee Required
Zìp	Country		Zip	_	untry		6.	Election Campaign Financing Trust Fund Contribution			.00 May Be ded to Fees
					10. Name and Address of New Registered Agent						
PLC INVESTMENTS INC.				81 82	Name Street Address	s (P	O. Box Number is Not Accepta	ole)			
STE 432	1				83					85	Zip Code
	Suite, Apt. #, etc. City & State Zip 9. Name PLC INVESTMENTS I 420 LINCOLN RD STE 432	City & State Zip Country [25] 9. Name and Address of Curre PLC INVESTMENTS INC. 420 LINCOLN RD STE 432	Suite, Apt. #, etc. City & State Zip Country 25 9. Name and Address of Current Regis PLC INVESTMENTS INC. 420 LINCOLN RD STE 432	Suite, Apt. #, etc. Suite, Apt. #, etc.	26	26	26	Suite, Apt. #, etc. Suite, Apt. #, etc. 4.	Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Zip Country Suite, Apt. #, etc. Zip Country Suite, Apt. #, etc. City & State Suite, Apt. #, etc. Su	Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Ad 9. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) STE 432

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, 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 617.0503, Florida Statutes.

CICNATURE						· ·
SIGNATURE	Signature, typed or printed name of registered agent and title if app	olicable (NOTE: F	legistered Agent signature i			
12.	OFFICERS AND DIRECT	ORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PTD	☐ DELETE	1.1 TITLE		Change	Addition
NAME	CEJAS, PABLO L		1.2 NAME	,	,	•
STREET ADDRESS	420 LINCOLN RD, STE 432		1.3 STREET ADDRESS		;	
CITY-ST-ZIP	MIAMI BCH FL 33139		1.4 CITY-ST-ZIP		·	
TITLE	SD	☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME	MONTERO, HILDA C		2.2 NAME			
STREET ADDRESS	420 LINCOLN RD STE 432		2.3 STREET ADDRESS			*
CITY-ST-ZIP	MIAMI BCH FL 33139		2. 4 CITY-ST-ZIP			
TITLE	D	☐ DELETE	3.1 TITLE		Change	Addition
NAME	NEITZEL, J L		3.2 NAME			
STREET ADDRESS	420 LINCOLN RD, STE 432		3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI BCH FL 33139		3.4, CITY-ST-ZIP	`		
TITLE		☐ DELETE	4.1 TITLE	Director/V.President/Treas	ur e L^{Change}	★ Addition
NAME			4. 2 NAME	Cejas, Gertie		
STREET ADDRESS			4.3 STREET ADDRESS	420 Lincoln Rd, Ste 432		
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Miami Beach, FL 33139		
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
	J		6.4 CITY-ST-ZIP	J		

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, with all other like empowered.

SIGNATURE: SIGNATURE: 1/15/99 305-531-5220

SIGNATURE:

305-531-5220