FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 13 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT** # N9400005483 (2)

NC.						
Principal Place of Business		Mailing Address			r radicial die jain alon Edizi gant sous Baist alber Errit diede jun 1081	i
2910 JOSIE BILLIE AVENUE HOLLYWOOD FL 33024		6700 RALEIGH ST HOLLYWOOD FL 33024-2808			3. Date Incorporated or Qualified 11/03/1994	
		U\$			4. FEI Number Applied For	
A D D D D D D D D D D		10			65-0548593 Not Applicat	
2. Principal Place of Business		2a. Mailing Address			5. Certificate of Status Desired	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be	
22		27			Trust Fund Contribution Added to Fees	
City & State		City & Stale			7. Is this nonprofit corporation a homeowners association?	
Zip Country		Zip	Country		8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre	ent Registered Agent	81	Name	10. Name and Address of New Registered Agent	_
PAYNE,	ARLEN		82		Address (P.O. Box Number is Not Acceptable)	
6700 RALEIGH STREET				Sireei	Address (F.O. Box Number is Not Acceptable)	
HOLLYW	OÒD FL 33024		83			
			84	City	85 Zip Code	
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statut	es, the above	-named	d corporation submits this statement for the purpose of changing its register.	eđ
office or r	egistered agent, or both, in the Stat im familiar with, and accept the obli	e of Florida. Such change was gations of, Section 617,0503, Fl	authorized by orida Statutes	the cor	d corporation submits this statement for the purpose of changing its registered rporation's board of directors. I hereby accept the appointment as registered	t
SIGNATURE						
12.	Signature, typed or printed name of registered at	gent and title if applicable. (NOT ND DIRECTORS	E Rogistered Age	nutengia In	e required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE		Change Addition	ion
NAME	PAYNE, ARLEN	—	1.2 NAME			
STREET ADDRESS	C/O 6700 RALEIGH AVENUE		1.3 STREET	ADDRESS		
CITY-\$1-ZIP	HOLLYWOOD FL		1.4 CITY - S	1-ZIP		
TITLE	D MINOCHIT	☐ DELETE	2.1 TITLE		Change Additi	ion
name Street address	MICCO, VINCENT 6311 NW 34TH ST		2.2 NAME 2.3 STREET	Annocee		
CITY-ST-ZIP	HOLLYWOOD FL		2.4 CITY-S		'	
TITLE	0	☐ DELETE	3.1 TITLE		☐ Change ☐ Additi	ion
NAME	BILLIE, SALLY		3.2 NAME			
STREET ADDRESS	3021 NW 63RD AVE		3.3 STREET	ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL	DELETE	3.4. CITY - S	T-ZIP	Change Additi	ían
TITLE NAME	JUMPER, ANNIE	F" DETER	4.1 TITLE 4.2 NAME		C change C Aouto	ЮH
STREET ADDRESS	A AAAMAI I AAA IIIA-		4.3 STREET	ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		4.4 CITY-ST			
TITLE	1	☐ DELETE	5.1 TITLE		☐ Change ☐ Additi	ion
NAME	MICCO, LORETTA		5.2 NAME			
STREET ADDRESS	63311 NW 34TH ST		5.3 STREET			
CITY-ST-ZIP TITLE	HOLLYWOOD FL S	⊠ DELETE	5.4 CITY-ST	- ZIP	Secretary Change Additi	ion
NAME	HARRIS, H PEPPER	Artenie	6.2 NAME		Alreia Savehez	
STREET ADDRESS	5680 ERIC CIRCLE		6.3 STREET	ADDRESS	3002 Howard Tommie Dr	
CITY-ST-ZIP	FT LAUDERDALE FL		6.4 CITY - S1		Hollywood, FL 33024	
14. I hereby of indicated officer or in Block 12 of SIGNAT	on this annual report or supplemen director of the corp ration or the rec or Block 13 if chapted, or on an atti	with this filing does not qualify fi tal annual report is true and acc serier or trustee empowered to achment with an address.	or the exempt curate and that execute this r	ion state It my sig eport as	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic gnature shall have the same legal effect as if made under oath; that I am an s required by Chapter 617, Florida Statutes; and that my name appears in	'n