SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

Sandra B. Mortham Secretary of State

1996

N9400005842 (9) DOCUMENT #

THE DOMESTIC VIOLENCE EDUCATION AND PREVENTION PROJECT INCORPORATED

ROJECT INCORPORATED										HA TANK BANK BANA		
Principal Place of Business Mailing Address												
12930 SW 149TH ST P.O. BOX 16-5224 MIAMI FL 33186 MIAMI FL 33116-5224								į				
								Ì	3. Date Incorporated or Qualified 11/28/1994	3a. Date o	f Last Re	
2. Principal Place of Business				2a. Mailing Address					4. FEI Number			plied For
21				26					65-0547598		No	t Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired	□ \$	8.75 / Fee Re	Additional equired
City & State	·	7-411	28						Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip Country				Zip Cou				8. This corporation has liab		intangible tax ı	under s.	199.032,
24	0. 11	25	29					Florida Statutes Yes X No				
	9. Name	and Address of Curre	ent Regis	tered Agent	· · · · · ·	81	A1		10. Name and Address of New Re	gistered Agen	ıt	
IACUC	ON MOUNT		8			me						
JACKSON, VICKIE M 12930 SW 149TH ST				i			Street	Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33116-5224									· · · · · · · · · · · · · · · · · · ·			+
MICSIMI	1 1 33110)224				83						
	•					84	City			FL 8		
		ions of Sections 617.05 ent, or both, in the Stat th, and accept the obli					-named the corp	corpora poration's	ation submits this statement for the p s board of directors. I hereby accep	urpose of chan t the appointme	ging its ant as re	registered gistered
SIGNATURE	•											
	Signature, typed	or printed name of registered a			OTE Registe	ered Age	n) signatur	e required w	when reinstating)	DATE		
12.	В	OFFICERS A	ND DIREC	···	13			T 28 1.	ADDITIONS/CHANGES TO OFFE			S IN 12
MILE	IACKS	ON VICKIE		DELETE		THTLE		P/'	T/D	54.	Change	Addition
NAME		S.W. 149TH STREE	т		1.2	NAME			•			
STREET ADDRESS		FL 33186	•		1		adoress	1				
CITY-ST-ZIP TITLE	VP	FL 33100		DC: EYE		CITY-S	T - ZIP	1272				
NAME		M E. JACKSON ED.	n	DELETE		TITLE		V/ 1	D	7	Change	Addition
	REET ADDRESS 12930 SW 149TH ST			22 N								
MINE EL ASAGA							ADDRESS					
CITY-ST-ZIP TITLE	VPS	FL 33 100		DELETE		CITY - S	T-ZIP	3 01				
NAME		S. SMITH		F" ptrest		iirt.		'V/ J	V	₩	Change	Addition
STREET ADDRESS		W. 76TH ST				NAME	*******					
CITY-ST-ZIP	1	FL 33150					ADDRESS					
TITLE				DELETE		CITY-S	1 - ZIP	110	75		Change	No.
NAME						2 NAME		Y/3	declaie W. Surite	L) \	Juanye	Addition
STREET ADDRESS							address	TE	leshia W. Smith 9 N.W. 76 Street			
CITY - ST - ZIP						CITY-S'			ami FL 83150			
TITLE				DELETE		TITLE ,	- 211	Pke	•		Change	Addition
NAME				_		NAME		}	3000018 9 -07/19/960100	18913	, and	
STREET ADDRESS						•	ADDRESS		-07/19/960100	J703 9		
CITY-ST-ZIP						CITY-SI			***61.25			
TITLE				DELETE		TITLE		 		170	Change	Addition
NAME					- 1	NAME				14 N	<u>'</u> נ	٣
STREET ADDRESS							ADDRESS			ΛY	X	01-
CITY-ST-ZIP						CITY - ST					15-	7 (M (C)
44 Indo bosob		Mark to Committee to the Committee of th										

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(1). 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 AND TYPED OF FINTED NAME OF BIGNING OFFICER OF DIRECTOR