## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE: d



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 14 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## POCUMENT # N9500002217 (6)

TRINITY CULTURAL ASSOCIATION, INC.							ľ	. KANYARI BAB KANA AKKI AKKI BAHI BAKI BAKI	111 <b>5</b> 144 11 <b>3</b> 4 11 <b>1</b>		
Principal Place of Business Mailing Address								-			
4648 SW 31ST DR 4648 SW 31ST DR HOLLYWOOD FL 33023 HOLLYWOOD FL 33023								3. Date Incorporated or Qualified 05/09/1995 4. FEI Number		Applied For	
							]	59-2700926		Not Applicable	
2. Principal Place of Business 21			2a. Mailing Address 26					5. Certificate of Status Desired		Additional Required	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees				
City & State	8		City & State			i	7. Is this nonprofit corporation a homeowners association?				
<b>23</b> Zip			Zip Country					∐ Ye:			
24	25		29 30		<b>-</b>		ł	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
<u>571</u>	9. Name and Add				<del>"</del> —	<del></del>		10. Name and Address of New Registe			
					81	Name					
BEERAN, RAMESH 4648 SW 31ST DR					82 Street Ad			s (P.O. Box Number is Not Acceptable)			
	OOD FL 33023			83	·						
· · · · · · · · · · · · · · · · · · ·					84 City				85 Zir	Code	
					i '	ì .			<b>FL</b>		
11. Pursuant i office or re agent. I a	to the provisions of Se agistered agent, or bo m familiar with, and ac	octions 617,0502 ar oth, in the State of F occept the obligation	nd 617,1508, Flo Florida, Such chi ns of, Section 61	orida Statutes, ange was autl 17.0503, Floric	the above norized by la Statutes	e-named / the corp s.	corpor oration	ation submits this statement for the purpon's board of directors. I hereby accept the	se of changing appointment a	its registered is registered	
SIGNATURE _								·			
12.	Signature, typed or printed na			(NOTE: R	egistered Age	ent signature	required	when reinstating) D/ ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	10 IN 20	
TITLE	DP	OFFICERS AND D		DELETE	1.1 TITLE			ADDITIONS/CHANGES TO OFFICERS	Change		
NAME	BEERAN, RAMES	SH .	_	020272	1.2 NAME	}			E. Sinango		
STREET ADDRESS	4648 SW 31ST D				1.3 STREET	ADDRESS					
CITY-ST-ZIP	HOLLYWOOD FL				1.4 CITY-S	1					
TITLE	DV			DELETE	2.1 TITLE				Change	☐ Addition	
NAME	Beeran, Nirmai	LA			2.2 NAME						
STREET ADDRESS	9729 117 ST				2.3 STREET	ADDRESS					
CITY-ST-ZIP	RICHMOND HILL	<b>OUEENS NY 11</b>			2.4 CITY-5	ST-ZIP	<u> </u>			1 2 2 10	
TITLE	DST		L	DELETE	3.1 TITLE	Į.			Change	☐ Addition	
NAME MARKE ADDRESS	JAGDEO, ANN 4648 SW 31ST D	NO.			3.2 NAME	*******					
STREET ADDRESS	HOLLYWOOD FL				3.3 STREET	1					
OTY-ST-ZIP	HOLLINOOD FL			DELETE	3.4. CITY - 5 4.1 TITLE	DI-ZIF			Change	Addition	
NAME					4. 2 NAME	l					
STREET ADDRESS					4.3 STREET	ADDRESS					
CITY-ST-ZIP					4.4 CITY - S	T-ZIP				j	
TITLE				DELETE	5.1 TITLE				Change	Addition	
NAME					5.2 NAME	- 1				ļ	
STREET ADDRESS					5.3 STREET	ADDRESS					
CITY-ST-ZIP			·	DELETE.	5.4 CITY-S	T-ZIP			17 05	A 3 3 3 4 7 5 -	
TITLE			Ш	DELETE	6.1 TITLE	İ			☐ Change	Addition	
NAME					6.2 NAME					ļ	
STREET ADDRESS					6.3 STREET						
CITY-ST-ZIP	ertify that the informat	tion supplied with t	his fiting does no	ot qualify for the	6.4 CITY-S		d in Se	ection 119.07(3)(i). Florida Statutes I furth-	er certify that th	e information	
Indicated officer or of Block 12 of	on this annual report of director of the corpora or Block 13 if changed	or supplemental an ition or the receiver it, or on an attacher	nnual report is tru r or trustee emport ent with an addi	ue and accura owered to exe ress.	ite and the cute this	at my sigr	nature require	ection 119.07(3)(i). Florida Statutes. I furth shall have the same legal effect as if mad ed by Chapter 617, Florida Statutes; and t	le under oath; ti hat my name a	hat I am an ppears in	