FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # N9500002254 (9) THE BABY BROCHA FUND, INC.					TALLAHASSEE.FLORIDA			
								Principal Place
4557 N JEFFER	. =	4557 N JEFFERSON AVE	4557 N JEFFERSON AVE MIAMI BEACH FL 33140-2937					
MIAMI BEACH I	rL 33140	MINMI DENOTE IE SOITO	.901		Date Incorporated or Qualified	3a. Date of Last Report		
					05/08/1995	01/31/1996		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0592845	Applied For			
Suite, Apt	# etc	Suite, Apt. #, etc.			03 0392043	Not Applica \$8.75 Additional		
22	n, 0,0.	27			5. Certificate of Status Desired	Fee Required		
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be			
23	·	28	<u>.</u>		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Coun	try	8. This corporation has liability for	- ' An / '		
24	25 9. Name and Address of Curre	29 29 Agent	30		Florida Statutes 10. Name and Address of New Re			
	5. Hamo and Addies of Care	pitt Hogistores Argoni		1 Name	IV. Isamo gile Addibas of Now No	JACOTO A JOIN		
MANAST	TER JOSHIJA D		[-	32 Street Add	drage (D.O. Boy M. mbar in Not Accounts)	1		
MANASTER, JOSHUA D 1428 BRICKELL AVE			"	Street Add	Address (P.O. Box Number is Not Acceptable)			
8TH FLC		Ē	33					
MIAMI F			Ē	34 City		FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 617.05	502 and 617.1508, Florida State	ites, the abo	ove-named cor	rporation submits this statement for the p	urpose of changing its register	ed	
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was	authorized	by the corpora	ation's board of directors. I hereby accep	t the appointment as registere	d	
SIGNATURE	The thing the grant accept the con-	gamente of populari e mideoeff	10,100 01010					
	Signature, typed or printed name of registered a			Agent signature requ	Urad when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		iai	
TITLE	D COUNTY FOR	DELETE	1.1 T(TL	J		Change Addi	JOH	
NAME OXECU ADOMOS	DUCHMAN, ESTI		1.2 NAV	··				
STREET ADDRESS	4557 N JEFFERSON AVE			EET ADDRESS			ļ	
CITY-ST-ZIP TITLE	MIAMI BEACH FL 33140 D	DELETE	1.4 GITV 2.1 TITL	r-ST-ZIP		Change Addi	ition	
NAME	FELLIG, FAIGE		2.2 NAM					
STREET ADDRESS	3800 PINE TREE DR			EET ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33140			Y-ST-ZIP				
TITLE	D	DELETE	3.1 TITL			☐ Change ☐ Addi	tion	
NAME	PERL, RUTH		3.2 NAN	AE	-tr	A _{1.4.}		
STREET ADDRESS	4340 N BAY RD		3 3 STR	EET ADDRESS	·	•		
CITY - ST - ZIP	MIAMI BEACH FL 33140		3.4. CIT	Y-ST-ZIP				
TITLE		☐ DELETE	4.1 TITL	- 1		☐ Change ☐ Addi	ilion	
NAME .			4. 2 NAJ	- 1				
STREET ADDRESS				EET ADDRESS				
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STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP			4	r-ST-ZIP				
TITLE		DELETE	6.1 TITL			Change Add	lion	
NAME			6.2 NAN			-		
STREET ADDRESS			6.3 STR	EET ADDRESS				

14. I do 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.

6.4 CITY - ST - ZIP

SIGNATURE:

Posts QUELLEAUIRIESTI DUCHUN

APPROVED AND FILED

97 FEB -7 AM 9: 49

SECRETARY OF STATE