## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N9500004372 (7)

## FILED Aug 11 1997 8:00am Secretary of State

Principal Place of Business Mailing Address  745 NORTHEAST 117 STREET 745 NORTHEAST 117 STREET BISCAYNE PARK FL 33161  Principal Place of Business Mailing Address  745 NORTHEAST 117 STREET BISCAYNE PARK FL 33161						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 3a. Date of Last Report			
							09/11/1995	04/18	/1996
2. Principal Place of Business 2a. Melling Address 21 - SAM 5 26 8 A M						4. FEI Number 65-0608459	-	Applied For Not Applicable	
Suite, Apt.		1241	, Apt. #, etc.	-				□ \$8	75 Additional
22 27						5. Certificate of Status Desired	1 1 '	ee Required	
City & State City & State			& State				6. Election Campaign Financing		.00 May Be
23		28		T			Trust Fund Contribution		ded to Fees
Zip 24	Country 25	<b>Zip</b>		30 Coun	try		<ol> <li>This corporation owes or has pa Personal Property Tax due June</li> </ol>		ar Intangible
24	9. Name and Address of Curre		Agent	lani			10. Name and Address of New Re		<u> </u>
					11 Nam	ie		<u> </u>	
FITZGERALD, DAN 745 NORTHEAST 117 STREET BISCAYNE PARK FL 33161				8	2 Stree 3 City	et Addre	ess (P.O. Box Number is Not Acceptat	FL 85	Zip Code
office or agent. If		PAN ent and title if applic	PITEGO cable (NO	GRA 4	)		oration submits this statement for the pon's board of directors. I hereby accedure the property of the property of when reinstating)  ADDITIONS/CHANGES TO OFFICE	/9/97 DATE	
TITLE	P		DELETE	1.1 TITL	E	V	- DE MEST AND STY	ن 🗆 تي	ange 🗹 Addition
NAME	FITZGERALD, DAN	_		1,2 NAN		MA	OGRWOOD, ANNETT 195 N. BAY SHORE	DR	
STREET ADDRESS	745 NORTHEAST 117 STREE	T		1.3 STRI	ET ADDRES	s 59	170	•	
CITY-ST-ZIP	BISCAYNE PARK FL 33161		T NEIGH		-ST-ZIP		IAHI, FC 33/8/		ange Addition
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CITY-ST-ZIP	BISCAYNE PARK FL 33161	'			:ET AUDRES (-ST-ZIP	12	AM1156 33/3	8 E	/
TITLE	V	<del></del>	DELETE	3.1 TITL		12		☐ CI	ange Addition
NAME	DAWSON, ROBERT			3.2 NAM	E	4	AMB, OUNN ST NE 187 STR	OFT	•
STREET ADDRESS	2400 NORTHEAST 6 AVENUE	#108		3.3 STRE	ET ADDRES	s   🌮	BONG 181 OF TO		
CITY-ST-ZIP	NORTH MIAMI FL 33161			3.4. CIT	-ST-ZIP	^	JORTH MIAMI, FC	3316/	
				4 4 7(7)	-	1	·		
TITLE	Ť		DELETE	4.1 THTL				L] Ct	ange Addition
NAME	T HACH, BETTY		☐ DELETE	4. 2 NAN	ΛÉ			LI CI	ange Addition
NAME Street address	T HACH, BETTY 987 NE 96 STREET		☐ DELETE	4. 2 NAM 4.3 STRE	ME Et adores	s		<b>∟</b>	ange Addition
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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.

The Standal DE THE ORDER BERLY

F/7/97 305-895-731