NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N9500005042

1. Corporation Name

LATIN AMERICAN MOTORCYCLE ASSOCIATION (L.A.M.A.) OF MIAMI, INC.

Principal Place of Business

Mailing Address

1315 N.W. 30TH AVENUE MIAMI FL 33125

1315 N.W. 30TH AVENUE MIAMI FL 33125

## FILED Mar 02, 1999 8:00 am Secretary of State

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Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Zip  Zip  Country  Zip  Country  Suite, Apt. #, etc.  28  Country  Suite, Apt. #, etc.  City & State  City & State  Suite, Apt. #, etc.  City & State  City & State  Suite, Apt. #, etc.  City & State  Suite, Apt. #, etc.  City & State  City & State  Suite, Apt. #, etc.  City & State  Suite, Apt. #, etc.  City & State  Suite, Apt. #, etc.  Suite	2. Principal P	lace of Business	2a. Mailing Address			3. Date Incorpor			•	
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Applied For   Not Applicable	21					10/25/199!	5		,	
City & State  City & State  28  City & State  28  City & State  28  Country  Country  Country  Country  Country  Country  Country  Country  Country  6. Election Campaign Financing Trust Fund Contribution  Added to Fees  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  ROMERO, ANGEL  1315 N.W. 30TH AVENUE  MIAM! FL 33125  82  Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  NOTE: Registered Agent aignature required when reinstating)  DATE  12.  OFFICERS AND DIRECTORS IN 12  TILE  PD  Country  6. Election Campaign Financing Fee Required  6. Election Campaign Financing Fee Required  6. Election Campaign Financing Fee Required  8.1  Name  8.2  Street Address (P.O. Box Number is Not Acceptable)  8.3  Street Address (P.O. Box Number is Not Acceptable)  8.4  City  FL  8.5  Zip Code  1.1  PL  8.5  Zip Code  1.2  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILE  PD  Change Additional							-	App	lied For	
City & State  Zip Country  Zip Country  Zip Country  State  28  Zip Country  State  29  30  Country  6. Election Campaign Financing Trust Fund Contribution  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  ROMERO, ANGEL  1315 N.W. 30TH AVENUE  MIAMI FL 33125  81  Name  82  Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  12.  OFFICERS AND DIRECTORS  13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Additional Fee Required Four States For Stat	22		27			65-061509	14		Not	Applicable
Zip Country Zip Country 30 Sections Country 29 Solution Country 30 Trust Fund Contribution Added to Fees 4 Added to Fees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83	City & Stat	te	City & State			5. Certifcate of S	Status Desired			
24 25 29 30 Trust Fund Contribution Added to Fees  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  1315 N.W. 30TH AVENUE  MIAM! FL 33125  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, hyped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD		Country		Country	<del></del>	6 Election Cam	naign Financing		\$5.00	vlav Re
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83	¬ `	— · ·		_ ′						*
ROMERO, ANGEL 1315 N.W. 30TH AVENUE MIAMI FL 33125  82 Street Address (P.O. Box Number is Not Acceptable)  83   84 City  FL  85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition				1301				egistered	Agent	
13. N.W. 30TH AVENUE  MIAMI FL 33125  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signeture required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  Change Addition	<del></del>	The state of the s		81	Name			,	•	,
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CITY-ST-ZIP 6.4 CITY-ST-ZIP	STREET ADDRESS			6.3 STREE	TADORESS					•

14. I 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 armual 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 account 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 attachysent with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED AME OF SIGNING OFFICER OR DIRECTOR

1/23/99 (30r)633822

CR2E037 (11/98