## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 N95000005093 (8) DOCUMENT #

THE FRATERNITY OF THE LORD OF MIRACLES, INC.

Principal Place	of Business	Mailing Ad	Mailing Address				ı radırıdı dığı iğidi diril bayın bayın dayin dayin delidi dirili düğidi i Diğü işil iddi					
236 SOUTH WASHINGTON DRIVE SARASOTA FL 34236			236 SOUTH WASHINGTON DRIVE SARASOTA FL 34236									
							3. Date Inc.	prograted or Qualified 25/1995	3a. Date	of Last	Report	
2. Principal Pl	ace of Business	2a. Mailing	2a. Mailing Address				4. FEI Numi	oer . A	l <u></u>		upplied For	
21		26					65~	0671728			lot Applicable	
Suite, Apt.	#, etc.	<del></del>	Suite, Apt. #, etc.				5. Certificat	e of Status Desired		\$8.75	Additional	
City & State			27								Required	
23	<del>9</del>	· ·	City & State					6. Election Campaign Financing \$5.00 May Be				
Zip	Country	Zip		T c	ountry			nd Contribution			to Fees	
24	25	29		30	Jul III y		8. This comp Florida S	poration has liability for i	ntangible tax □ Yes □ N		199.032,	
	9. Name and Address of Curre		Agent	1901	Т		· · · · · · · · · · · · · · · · · · ·	nd Address of New R		·		
			-		81	Name			ogiotoi ou Aş		***	
SABA, R	IICHARD D				82	0						
2033 MA	UN STREET #303					Street	Address (P.O. Box Ni	umber is Not Acceptab	le)			
SARASO	TA FL 34237				83							
•												
•					84	City			FL	<b>85</b> Zip	Code	
11. Pursuant	to the provisions of Sections 617.050	2 and <b>617</b> .1508,	Florida Statutes	s, the ab	L	named co	orporation submits thi	s statement for the our		ing its re	nistered office	
O Legisler	red agent, or both, in the State of Flor th, and accept the obligations of, Sec	ida, Such chang	e was autnorize	d by the	corp	oration's	board of directors 11	nereby accept the appoint	ointment as re	gistered	agent. I am	
SIGNATURE	,		ional otatatos.									
	Signature, typed or printed name of registered agen	t and title if applicable	TOM)	F Register	eo Agen	t signature r	equired when reinstating)		DATE		<del></del>	
12.		ID DIRECTORS		13			ADDITION	NS/CHANGES TO OFF	CERS AND D	IFIE C 1 O	RS IN 12	
TITLE	D OADLOTDOM IDAGEMA		DELETE	11	TITLE					Change	Addition	
NAME	CARLSTROM, IRASEMA			1.2	NAME							
STREET ADDRESS	236 SOUTH WASHINGTON D	IRIVE		1.3	Street	ADDRESS						
CITY-ST-ZIP	SARASOTA FL 34236			1.4	CITY-S	T - ZIP						
TITLE	D DACHEDOEC ALEBEDO		DELETE	21	TITLE					Change	Addition	
NAME	PACHERRES, ALFREDO			22	NAME							
STREET ADDRESS	5712 31ST COURT EAST					ADDRESS						
CITY-ST-ZIP	BRADENTON FL 34203		<u> </u>		CHY-5	T-ZIP						
TITLE	_		DELETE		TITLE	-				Change	☐ Addition	
NAME	DEL AGUILA, JHENNY 236 SOUTH WASHINGTON (	ND6VE		32	NAME							
STREET ADDRESS	SARASOTA FL 34236	Y THE		. 33	STREET	ADDRESS						
CITY-ST-ZIP TITLE	D		C Inc. exc	_	CITY - S	T - ZiP					·	
	DEL AGUILA, GREYS		DELETE		TITLE					Change	Addition	
NAME	236 SOUTH WASHINGTON E	DIVE			NAME							
STREET ADDRESS	SARASOTA FL 34236	IIIVE.				ADDRESS						
TITLE	GARAGOTA 1 E 04200	<del></del>	DELETE		CITY-S	f-ZIP				ettina		
NAME					TITLE			000185			☐ Addition	
STREET ADDRESS					NAME	IDDOCCO		7/15/96~~010 61-25	C3UU4			
						ADDRESS	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	61.25				
CITY-ST-ZIP TITLE			DELETE		CITY-S	I - ZiP			<del></del>	Ohaa	C Advers	
NAME				•	TITLE				Ц	Change	☐ Addition	
STREET ADDRESS					NAME	1000000				,		
						ADDRESS		. 10.	150	(-)		
CITY-ST-ZIP	····			6.4	CITY - S	I - 21P		T	1 /	•		

14. 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)(3). Porida 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 TOPED ON PRINTED PONTED IRAS

IRASEMA CARLSTROM

FEB 1, 1996 (941)388-2673