FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Morthage

Secretary of State

DIVISION OF CORPORATIONS

1997 DOCUMENT #

Principal Place of Business

N95000005995 (4)

MARIAN FRATERNITY CORPORATION

Mailing Address

Jul 02 1997 8:00am Secretary of State



rinciparriaci	c or the mass	Maining Address			
12342 SW 99TH MIAMI FL 33186		12342 SW 99TH ST MIAMI FL 33186-2545			
					3. Date Incorporated or Qualified 3a. Date of Last Report 05/21/1996
	N.W. 135 ST.	2a. Mailing Address	12.0	5 51	4. FEI Number APPLIED FOR 65-0663/75 Not Applied For
21 2/01 Sulte, Apt.		26 2/81 1\0\. Suite, Apt. #, etc.	_1 7) 	> 21	SR 76 Additional
27					5. Certificate of Status Desired Fee Required
City & State Locke, Fr. 28 Opa Locke				FL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip (054 26 USA	29 333054 30	Countr	35 A	8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Signal Yes No
	9. Name and Address of Curren	t Registered Agent		.1	10. Name and Address of New Registered Agent
	17 1010050		81	1 Name	
SANCHEZ, LOURDES				2 Street A	Address (P.O. Box Number is Not Acceptable)
12342 SW 99TH ₂ ST				3	
ITHERITIES	L 00 100				
	•		84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617 1508, Florida Stalutes,	the abov	ve-named	corporation submits this statement for the purpose of changing its registered
agent. I a	m familiar with, and accept the obligation	ations of, Section 617.0503, Floric	da Statute	oy ina corp es.	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE .					
12.	Signature, typed or printed name of registered age OFFICERS ANI	<u> </u>	13.		required whon reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 DILE		ADDITIONS/GITANGES TO CIT TEENS AND DIRECTORS IN TE
NAME	VARELA, MARIA	_ 	1.2 NAME	DH:	Mideros, Mariana T. Change Addition 2781 N.W. 135 STreet
STREET ADDRESS	12342 SW 99TH ST		1.3 STREE	T ADDRESS	2781 N.W. 105 STICE
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-	S1-ZIP	Opa Locka, FL 33054
TITLE	VD	⊠ DELETE	2.1 TITLE	DV	Opa Locka, FL 33054 Emma Mideros Change MAddilio
NAME	MIDEROS, MARIANA T		2.2 NAME	1	2781 N.W. 135 STreet
STREET ADDRESS	11800 SW 80 ST. UNIT 120 MIAMI FL 33186			T ADDRESS	And take of short
CITY-ST-ZIP TITLE	MIAMI FE 33 180	DELETE .V.	2. 4 CITY 3.1 TITLE		Opa Locka, Fr 33051 Change Bladditio
NAME	\$ANCHEZ, LOURDES	DELETE OX	3.2 NAME	7	
STREET ADDRESS	12985 SW 112 ST.			ET ADDRESS	Sanchez, Lourdes 12985 Sw 112 SI
CITY-ST-ZIP	MIAMI FL 33186		3.4. CITY	ſ	Miami 12 33186
TITLE	DT	DELETE	4.1 TITLE		Ji- Maria Varela Change Addition 12342 S.W. 99 ST.
NAME	CASANOVA, DORIS		4. 2 NAME	<u>آ</u> ع	12242 S.W. 99 ST.
STREET ADDRESS	6327 SW 127 CT.		43 STREE	T ADDRESS	Miami, Fe 33186
CITY-ST-ZIP	MIAMI FL 33183	Documen	4.4 CITY-		
TITLE		☐ DELETE	5.1 TITLE		Change Additio
NAME Street Address			5.2 NAME		
CITY-ST-ZIP			5.3 STREE 5.4 CITY-	T ADDRESS	
TITLE		☐ DELETE	6.1 TITLE		Change Additio
NAME			6.2 NAME		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			6.4 CITY-		
	by cartify that the information surplied	d with this filing does not qualify f			stated in Section 119 07(3\/i). Florida Statutes, I further certify that the

I am an officer or director of the corporation or the receiver or trustee ampowered to execute this report as required by Chapter 617, Florida Statutes. I furnor 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 ampowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if practice.

C/ 192 (205)