FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

Suite, Apt. #, etc.

SIGNATURE:

City & State

22



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # N9600

N96000006520 (8)

MIAMI POWER TEAM FOUNDATION INC.

Country

Principal Place of Business	Mailing Address			
14236 SW 62ND ST. MIAMI FL 33163	14236 SW 62ND ST. Miami FL 33183-1921			
2. Principal Place of Business	2a. Mailing Address			

26

28

Suite, Apt. #, etc.

City & State

FILED
Jul 25 1997 8:00am
Secretary of State

|--|

B. This corporation has liability for intangible tax under s. 199.032,

305)380-8759

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified 12/23/1996

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

24	- 25	29	30	l		Florida Statutes LI Yes K No		
	9. Name and	Address of Current Regis	stered Agent			10. Name and Address of New Registered Agent		
-				81	Name	ne		
SANCHEZ, MIGUEL			82	82 Street Address (P.O. Box Number is Not Acceptable)				
14236 SW 62ND ST.			Street Address (P.O. Box Null fiber is Not Acceptable)					
MAMI FI	L 33183			83				
				-				
4				84	City	FL 85 Zip Code		
11. Pursuant t	o the provisions	of Sections 617.0502 and 6	17.1508, Florida Statutes,	the abov	e-name	ned corporation submits this statement for the purpose of changing its registerer		
office or n	gistered agent	of both, in the State of Flori	da. Such change was auth	orized by a Statute	the co	corporation's board of directors. I hereby accept the appointment as registered		
	'מג"עו			2010 2010	_ 1	2/8/97		
SIGNATURE _	Signaturi types or pr	inted name of registered asynch and title				ature required when reinstating) DATE		
12.	1.0	OFFICERS AND DIRE		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE T	YUNIO	, Santana	DELETE	1.1 TITLE		Treasurer Addition		
NAME	TIUS	tee		1.2 NAME		Yunior Santana		
STREET ADDRESS	4.5940	N.W 4 terr		1.3 STREET	ADDRESS	france de la factual de la fac		
CITY-ST-ZIP	WILL	11. Fil. 33126		1.4 CITY-5	ST-ZIP	MIAMI, Fl. 33126		
TITLE T	Trust	>/	☐ DELETE	21 TITLE		Treasurer II Change Addition		
NAME	MARI	J. SANCE	607	22 NAME		Jorge Moreno		
STREET ADDRESS		S.W. 715	1	2.3 STREET	ADORESS	1		
CITY-ST-ZIP	MAIAN	J. F. 331 M	1-	2.4 CITY-		NIAMI, FL. 331		
TITLE TO	2018	ECTOR	DELETE	3.1 TITLE		Change DC Addition		
NAME	Lige		_	3.2 NAME		Secretary Event coordinator		
STREET ADDRESS	1220	1 S.W. 71 St		3.3 STREET	ADDRESS			
CITY-ST-ZIP	1520	1AMI FI- 331	83	3.4. CITY-	ST-ZIP	M/ANI #1. 33.90		
TITLE		TOTAL STATE OF THE PARTY OF THE	DELETE	4.1 TITLE	<u> </u>	Secretary (666102) Change DAddition		
NAME				4. 2 NAME		Maria J. Sanchez		
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP				4.4 CITY-5		MIAMI, F. 33183		
TITLE			DELETE	5.1 TITLE	J1 4.11	Secretary (Hand, Capped Change X Addition		
NAME			-	5.2 NAME		Lourdes Mirabai dordinotor		
STREET ADDRESS				5.3 STREET	T ADDRESS			
CITY-ST-ZIP				5.4 CITY-		MIANI EL. 33175		
TITLE			DELETE	6.1 TITLE	J1 E.II	Change Addition		
NAME			_	6.2 NAME				
STREET ADDRESS	1			6.3 STREE	T ADDRESS	rss l		
CITY-ST-ZIP				6.4 CITY-				
14. I do heret	y certify that th	e information supplied with t	his filing does not qualify to	or the exe	mption	on stated in Section 119.07(3)(i), Florida Statutes. I further certify that the		
information indicated on this annual/eport 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 consolution or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name								
appears l	appears in Block 12 or Block 13 if shanged, or of an attaching the address.							
-				110				

Country