1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9700000831

NON-VIOLENCE PROJECT FLORIDA, INC.

Principal Place of Business 300 BISCAYNE BLVD. WAY STE. 919 MIAMI FL 33131

Mailing Address

300 BISCAYNE BLVD. WAY STE. 919

MIAMI FL 33131

FILED Mar 01, 1999 8:00 am § Secretary of State

03-01-1999 90199 024 ****61.25

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 1	Place of Business 2a. Mailing /		ng Address			Date Incorporated or Qualifed 02/13/1997					,		
Suite, Apt.	# ata		te, Apt. #, etc.					El Number				Ann	lied For
 1 ' •	#, etc.	<u> </u>	ie, Api. #, eic.					3-381222	24		. · · · · ·		Applicable
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24	25	29	1	30			1	rust Fund C	ontribution	·	A	dded to	Fees
	9. Name and Address of Curre	nt Registere	d Agent				10. [Name and A	ddress of New	Registere	d Agent		
				8	11	Name			•				
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office or r	to the provisions of Sections 617.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. S	uch change was au	ithonzed b	y t	ine corporatio	n's boa	rd of directo	rs. I hereby acc	ept the app	ointment	as reg	istered
SIGNATURE										DATE			
	Signature, typed or printed name of registered age				gent	t signature required			HANGES TO C			ECTO	29 IN 12
12.	OFFICERS AI	ND DIRECTO		13.	_	10				•		lange	Addition
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NAME	ACEITUNO, ROBERT			1.2 NAM	_				AVE 1	CEIN	01		:
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NAME	WARSHAW, DONALD			2.2 NAM	£	1						•	-
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CITY-ST-ZIP	MIAMI FL 33128			2. 4 CITY	/• 81	T. ZIP							
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	SAVEDOFF, STUART DR.			3.2 NAM			,	•				•	
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NAME	CRAIG, BARRY			4. 2 NAM	Æ								
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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 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 attackment with an address, with all other like empowered.

SIGNATURE: