FILE NOW: FILING FEE 18 \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortharh

Secretary of State DIVISION OF CORPORATIONS

1998

FILED Jun 02 1998 8:00am Secretary of State

11/1/100

1211/11/12/11

W Sorporation Marito	00003518 (4)		
Coral Reef Four	ndation, I.P.C. n	ame Chang	ge fiked
Principal Place of Business	Mailing Address	444118	I 10011100 010 10111 10011 00114 00111 00111 00111 00111 00111 01111 01111 01111 01111 01111 01111 0111
1521 ALTON ROAD STE 76 MIAMI BEACH FL 33139	1521 ALTON ROAD STE 76 MIAMI BEACH FL 33139		3. Date Incorporated or Qualified 06/17/1997
			4. FEI Number Applied For Not Applied For Not Applied For
2. Principal Place of Business	2a. Mailing Address	· /4	5. Certificate of Status Desired \$8.75 Additional
21 Same as above	26 Skyrne as ub	ave	Fee Required
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State	City & State		7. Is this nonprofit corporation a homeowners association?
23	28		☐ Yes 🛣 No
Zip Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 25 <i>U.S.A</i> .	29	30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
9. Name and Address of Cur	rent Registered Agent	81 Name	· · · · · · · · · · · · · · · · · · ·
IOHNOON STANIEVE ID			
JOHNSON, STANLEY E JR 1444 BISCAYNE BLVD STE 230 MIAMI FL 33132		82 Stree	et Address (P.O. Box Number is Not Acceptable)
		63	
THE WOLLD		84 City	85 Zip Code
•			FL ~ ~
11. Pursuant to the provisions of Sections 617.0	0502 and 617.1508, Florida Statute at a of Florida Statute at a of Florida. Such change was a	es, the above-name	d corporation submits this statement for the purpose of changing its registered prporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the ob	ligations of, Section 617.0503, Flo	orida Statutes.	, position o doubt of production in the any acceptance approximation and acceptance acceptance and acceptance acceptanc
SIGNATURE			ore required whon reinslating) DATE
Signature, typed or printed name of registered 12. OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
		1.1 TITLE	☐ Change ☐ Addition
NAME FINITE VINIVIN (D)	ar in the same	1.2 NAME	
NAME (D) President/Chairingsul NAME Emile YUNKIN (D) STREET ADDRESS 1531 NITON DU SUITE	74	1.3 STREET ADDRESS	
CITY-ST-ZIP MIGINI BELICH FL 3	3/39	1.4 CITY - ST - ZIP	
TITLE (D) VICE CHAIRMAN OL		2.1 TITLE	Change Addition
NAME SERBLO ECHETAPE	ia (0)	2.2 NAME	
STREET ADDRESS GOO WEST AVE. Apt.	# 746	2.3 STREET ADDRESS	
	33/39 DELETE	2. 4 CHY-ST-ZIP 3.1 TITLE	Change Addition
NAME Betraida Ferrer (3.2 NAME	
STREET ADDRESS SISTAND Ave. Apt.	16	3.3 STREET ADDRESS	
CITY-ST-ZIP MIGINI BEACH, FL 3	33/39	3.4. CITY - ST - ZIP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	3
CITY-ST-ZIP	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Change Addition
TITLE		5.2 NAME	- · -
NAME STREET ADDRESS		5.3 STREET ADDRESS	700002545647 -06/03/9801031004
CITY-ST-ZIP		5.4 CITY-ST-ZIP	***70.00
TITLE	DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	(1/)
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
indicated on this annual report or suppleme	ental annual report is true and acc receiver or trustee empowered to	surate and that my s	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information signature shall have the same legal effect as if made under cath; that I am an as required by Chapter 617, Florida Statutes; and that my name appears in