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Feb 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000004120 (8)**

1. Corporation Name

**THE PEOPLE'S CLUB OF NIGERIA - USA, INC., MIAMI
BRANCH**

Principal Place of Business

Mailing Address

**11112 S.W. 129 PLACE
MIAMI FL**

**11112 S.W. 129 PLACE
MIAMI FL**



3. Date Incorporated or Qualified

07/22/1997

4. FEI Number

Applied For

☒ Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ORJI, EZEKIEL O
11112 S.W. 129 PLACE
MIAMI FL**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **ALISIGWE, GODWIN**
STREET ADDRESS **PO BOX 491255**
CITY-ST-ZIP **FT. LAUDERDALE FL 33349**

TITLE **D** ☒ DELETE

NAME **ANAM, OLIVER**
STREET ADDRESS **19080 N.W. 57 AVE. #306**
CITY-ST-ZIP **MIAMI LAKES FL 33015**

TITLE **D** ☒ DELETE

NAME **ANYAGALIGBO, CHRIS**
STREET ADDRESS **1340 N.W. 198 ST.**
CITY-ST-ZIP **MIAMI FL 33169**

TITLE **D** ☐ DELETE

NAME **ANYAMELE, RICHARD**
STREET ADDRESS **18520 N.W. 42 AVE.**
CITY-ST-ZIP **MIAMI FL 33055**

TITLE **D** ☐ DELETE

NAME **EGBEBIKE, MICHAEL**
STREET ADDRESS **10443 S.W. 118TH CT.**
CITY-ST-ZIP **MIAMI FL 33186**

TITLE **D** ☒ DELETE

NAME **NWADIGO, AMBROSE**
STREET ADDRESS **111 S.W. 4 AVE.**
CITY-ST-ZIP **POMPANO BEACH FL 33060**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **CHAIRMAN** ☐ Change ☒ Addition

1.2 NAME **ORJI, EZEKIEL O.**
1.3 STREET ADDRESS **11112 S.W. 129 PL.**
1.4 CITY-ST-ZIP **MIAMI, FL 33186**

2.1 TITLE **2ND VICE CHAIRMAN** ☐ Change ☒ Addition

2.2 NAME **UKPAI, EMMANUEL U.K.**
2.3 STREET ADDRESS **4700 NW 12th Court**
2.4 CITY-ST-ZIP **FL. Lauderdale, FL 33313**

3.1 TITLE **TREASURER** ☐ Change ☒ Addition

3.2 NAME **IKEME FUNA, OKANY**
3.3 STREET ADDRESS **255 NE 148 Street**
3.4 CITY-ST-ZIP **N. Miami Beach, FL 33161**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 attachment with an address.

SIGNATURE:

Ezekiel O. Orji

CHIEF(DR) Ezekiel O. Orji, 1/26/98

305 876-7305

CR2E037 (10/97)