

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000008698 (0)

1. Corporation Name

TITLE CITY OF DADE, INC.



Principal Place of Business

100 N.E. 84TH ST.  
2ND FLOOR  
MIAMI FL 33138

Mailing Address

100 N.E. 84TH ST.  
2ND FLOOR  
MIAMI FL 33138

3. Date Incorporated or Qualified  
02/02/1994

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number  
65-0464081

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

ROUTMAN, LLOYD M  
100 N.E. 84TH ST.  
2ND FLOOR  
MIAMI FL 33138

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1538, 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 607.0505, Florida Statutes.

SIGNATURE

Signature of Agent or other person registered with the corporation

DATE Registered Agent's signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME ROUTMAN, LLOYD M  
STREET ADDRESS 100 N.E. 84TH ST.  
CITY-ST-ZIP MIAMI FL 33138

TITLE ☐ DELETE

NAME ROZALES, SANFORD A  
STREET ADDRESS 100 N.E. 84TH ST.  
CITY-ST-ZIP MIAMI FL 33138

TITLE ☐ DELETE

NAME NAPOLEON, ELIMA  
STREET ADDRESS 375 N.E. 54TH ST.  
CITY-ST-ZIP MIAMI FL 33137

TITLE ☐ DELETE

NAME JACOB, ADELINE  
STREET ADDRESS 3816 S. LAKE TERRACE  
CITY-ST-ZIP MIRAMAR FL 33023

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 as required, or I am an attached agent with an address.

SIGNATURE:

SANFORD A. ROZALES

DATE

4/14/96

705-759-1600

CR2E034 (12/95)