FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

P96000023938 (9)

DOCUMENT # P960
1. Corporation Name
JOSE MARTI SCHOOL I, INC.

FILED Feb 20 1998 8:00am Secretary of State



2660 S.W. 17TH STREET MIAMI FL 33145 2660 S.W. 17TH STREET MIAMI FL 33145 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 25 65-0656794 Not Applied For Suite, Apt. #, etc. 27 City & State 26. Certificate of Status Desired 27 City & State 28 City & State 29 Country Fee Required 29 Country Zip Country Country Railing Address DO NOT WRITE IN THIS SPACE Applied For Applied For Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required Added to Fees First Fund Contribution Added to Fees			· .						
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Suite, Apt. 4, etc. Suite, Apt. 4, etc.		Place of Business	2a. Mailing Address				/_/	Applied For	
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Country 28 State Country 28 Country 28 Country 28 Country 28 Country 28 Country 29 30 Country 29 30 Country 29 30 Country 39 Country 39 30 Count						5. Certificate of Status Desired	1 4 4 4 4 4	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2p	City & Stat	 							
25 98 30 Personal Property Tax due June 20 16 No	Zip	Country		Country	······································	8. This corporation owes or has paid the current year Intangible			
BEOVIDES, MARIO B 2800 S.W. 17TH STREET MIAMI FL 33145 82 Street Address (P.O. Box Number is Not Acceptable) 13 Street Address (P.O. Box Number is Not Acceptable) 14 City 15 City 16 City 16 City 17 City Street Address (P.O. Box Number is Not Acceptable) 18 Street Address (P.O. Box Number is Not Acceptable) 19 City 10 City 11 Pursuant to the provisions of Sections 607.0502 and 507.1508, Florida Statutes, the 84 City 12 City Street Address (P.O. Box Number is Not Acceptable) 18 Street Address (P.O. Box Number is Not Acceptable) 19 City Street Address (P.O. Box Number is Not Acceptable) 10 City Street Address (P.O. Box Number is Not Acceptable) 11 Pursuant to the provisions of Sections 607.0502, Florida Statutes, the 84 City 12 City Street Address (P.O. Box Number is Not Acceptable) 12 City Street Address (P.O. Box Number is Not Acceptable) 12 City Street Address (P.O. Box Number is Not Acceptable) 13 Street Address (P.O. Box Number is Not Acceptable) 14 City Street Address (P.O. Box Number is Not Acceptable) 15 City Street Address (P.O. Box Number is Not Acceptable) 16 City Street Address (P.O. Box Number is Not Acceptable) 17 City Street Address (P.O. Box Number is Not Acceptable) 18 City Street Address (P.O. Box Number is Not Acceptable) 18 City Street Address (P.O. Box Number is Not Acceptable) 18 City Street Address (P.O. Box Number is Not Acceptable) 19 City Street Address (P.O. Box Number is Not Acceptable) 10 City Street Address (P.O. Box Number is Not Acceptable) 11 File	24			10				□ No	
280 S.W. 17TH STREET MIAMI FL 33145 88 87	Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent								
MIAMI FL 33145 B4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 507 1506, Florida Statulies, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the objected agent and recept the objected agent				181	Name				
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am femiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of th				82	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
11. Pursuant to the provisions of Soctions 607 0502 and 507 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Suparure typed or provided user of the postered Agents and the dispersative for the purpose of changing its registered of office or registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Suparure typed or provided user of the postered Agents and the dispersative for the purpose of changing its registered of office or registered agent. In a familiar and the dispersative for the purpose of changing its registered of office or registered agent. In a familiar agent and the dispersative for the purpose of changing its registered of office or registered agent. In a familiar agent and the dispersative for the purpose of changing its registered of office or registered agent. In a familiar agent				83					
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12.	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								
12.	SIGNATURE								
TITLE	12	· 		_	ent signature requ			DRS IN 12	
NAME BEOVIDES, MARIO B 12 NAME 13 STREET ADDRESS 2680 S.W. 17TH STREET 13 STREET ADDRESS 14 CITY-ST-ZIP						ADDITIONS/CHANGES TO OFFIC			
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STD	STREET ADDRESS	2660 S.W. 17TH STREET 23S		2.3 STREET	ADDRESS			[
NAME SANCHEZ, ELIDA 32 NAME 33 STREET ADDRESS 2660 S.W. 17TH STREET 33 STREET ADDRESS 51 STR	CITY-ST-ZIP	MIAMI FL 33145		2. 4 CITY-	ST-ZIP				
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CITY-ST-ZIP 6.4 CITY-ST-ZIP					ADDOCCO			1	
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		pertify that the information supplied w	ith this filing does not qualify for			n Section 119.07(3)(i). Florida Statutes. I	further certify that th	e Information	

nimipated on this annual report of supplianental annual report is the 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 trusted empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment and directors.)

SIGNATURE: