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



## **FILED** 7 Apr 29 1997 8:00am

	CORPORATION ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS					Secretary of State				
DOCU 1. Corporati	MENT # V16451									
S	ASAME STREET CHILD C	ARE III CORP.								
Principal Pla	ce of Business	Mailing Address	· · · · · · · ·			<b>-</b>				
12572	S.W. 88th Street									
Miami,	Florida 33186	Same								
l					- -	3. Date incorporated or Qualified 2/24/92	3a. Date	of Last R	eport	
2. Principal	Place of Business	2a. Mailing Address	<del></del>			4. FEI Number 65-0317652			oplied For of Applicable	
Suite. Apt	. #. etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$6.75 Additional Fee Required			
City & Sta	10	City & State	City & State			Election Campaign Financing     Trust Fund Contribution     Added to Fees				
Zip	Country	Zip		untry		8. This corporation has liability for		under s.		7
24	9. Name and Address of Curren	1 Registered Agent	30	1	· }	Florida Statutes L.  10. Name and Address of New Re	Yes :		<del></del>	4
	4. 118114 BIN ADDIGE TO DELLEY			61	Name			<del></del>	<del></del>	7
Sahira Salinas						ess (P.O. Box Number is Not Acceptate	ole)	<del></del>	<del></del>	
12572 S.W. 88th Street				83	<del></del>					4
Miami, Florida 33186							·			ل
			,,	94	•		: FL		Code	ì
11. Pursuant office or	to the provisions of Sections 607.050; registered agent, or both, in the State	2 and 607.1508, Florida Statu of Florida, Such change was	tes, the a authorize	DOVE	named corp the corporati	oration submits this statement for the poon's board of directors. I hereby acception's	urpose of ch	anging it	s registered registered	1
	am familiar with, and accept the obliga	itions of, Section 607.0505, Fi	orida Sta	itutes.			;			
SIGNATURE	Signature typed or printed name of registered age		E Registers	id Agent	Bignature require	ed when reinstating)	DAYE			
12.	Director, President & Treasurer Sahira Salinas 12572 S.W. 88th St.			ITLE		ADDITIONS/CHANGES TO OFFIC		RECTOR Change	S IN 12	966
TITLE NAME				AME			لمبيا	CHRING	- Addition	
STREET ADDRESS				TREET A	DORESS					18
City-St-ZIP	Miami Florida 33186			my-st-	ZIP			·		CR2E034
TITLE	Secretary	☐ OELETE	2.1 1		1		u	Change	Addition	၂၀
NAME	Maria Salinas			AME :	nnaces				•	
STREET ADDRESS CITY-ST-ZIP				HREI A	DORESS					
TITLE	MICHILL PLOSTON 331	DELETE	3.17			·		Change	Addition	1
NAME			1.214	AUE:	1					ĺ
STREET ADDRESS			3.3 \$	TREET A	DDRESS					1
CITY-ST-ZIP TITLE		☐ DELETE	34.0 41.1	71Y - \$1	-ZIP	<del></del>		Change s	Addition	-{
NAME		Can because	4.21		- {					ď
STREET ADDRESS				TREET AL	DDRESS			12	10 A	Λ.
CITY-ST-ZIP			440	ITY-\$T-	ZIP			<u> </u>	$\Omega \Sigma$	y.
TITLE		DELETE	5.1 T		- 1	70000016	122	Change	Abartion	1
NAME CERTE ADDRESS			5.2 N		nonece }	70000216 -05/01/970101	2112	•		
STREET ADDRESS CITY-ST-ZIP		•		TREET AL	· · · J	***165.00				-
TITLE		DELETE	6.1 7		<del></del>			Change	Addition	1
NAME			6.2 N	AME						ļ
STREET ADDRESS			6.3 \$7	TREET AL	DDRESS	•				
CITY-ST-ZIP	ny cortify that the information cumuliar	with this tiling does not avail	64 C	TY-ST-	ZIP	in Section 110 07/2011 Educate Cratical	1 huthar ca	tify that	the .	4
information f am an o appears	on indicated on this equal report or sufficer or director of the cocoration of the Block 12 or Block 13 if dyinged, or	ipplemental annual report is the eceiver or trustee empoyon an attachment with an ad-	vered to e	BCCUF8 BXBCUI	ate and that it	in Section 119.07(3)(i). Florida Statutel my signature shall have the same lega as required by Chapter 607. Florida S	effect as if n talutes: and t	nade uno hat my h	ier bath: tha ame	t