FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 APR 28 PM 7:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **706293** **(8)**

1. Corporation Name
ASTOR CONDOMINIUM INC

Principal Place of Business	Mailing Address
3510 HARRISON STREET HOLLYWOOD FL 33021	3510 HARRISON STREET HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/16/1963	3a. Date of Last Report: 01/31/1994
4. FEI Number: 70-6293160	☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	$68.75 Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SCHMEISSER, VIVIENNE
3510 HARRISON ST.
A-6
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name: HAYNES, Edith A.
82 Street Address (P.O. Box Number is Not Acceptable): 3510 Harrison Street #4
83
84 City: Hollywood FL 85 Zip Code: 33021

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Edith A. Haynes — EDITH A. HAYNES — DATE: 4/17/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	11 TITLE	VP XX Change ☐ Addition
NAME	HAYNES, EDITH	12 NAME	SANTILLO, Josephine
STREET ADDRESS	3510 HARRISON ST #4	13 STREET ADDRESS	3510 Harrison Street
CITY-ST-ZIP	HOLLYWOOD, FL 00000	14 CITY-ST-ZIP	Hollywood, FL. 33021
TITLE	D	21 TITLE	D XX Change ☐ Addition
NAME	SANTILLO, JOSEPHINE	22 NAME	DEININGER, Sam
STREET ADDRESS	3510 HARRISON ST	23 STREET ADDRESS	3510 Harrison Street #15
CITY-ST-ZIP	HOLLYWOOD, FL 00000	24 CITY-ST-ZIP	Hollywood, FL. 33021
TITLE	T	31 TITLE	T XX Change ☐ Addition
NAME	SCHMEISSER, VIVIENNE	32 NAME	HAYNES, Edith A.
STREET ADDRESS	3510 HARRISON ST #6	33 STREET ADDRESS	3510 Harrison Street #4
CITY-ST-ZIP	HOLLYWOOD, FL 00000	34 CITY-ST-ZIP	Hollywood, FL. 33021
TITLE	P	41 TITLE	P ☐ Change ☐ Addition
NAME	LAVALLE, MARK	42 NAME	LAVALLE, Mark
STREET ADDRESS	3510 HARRISON ST #11	43 STREET ADDRESS	3510 Harrison Street #11
CITY-ST-ZIP	HOLLYWOOD FL	44 CITY-ST-ZIP	Hollywood, FL. 33021
TITLE	S	51 TITLE	S XX Change ☐ Addition
NAME	CULLEN, MARGARET	52 NAME	NIVINS, Patricia
STREET ADDRESS	3510 HARRISON ST #3	53 STREET ADDRESS	3510 Harrison Street
CITY-ST-ZIP	HOLLYWOOD, FL 00000	54 CITY-ST-ZIP	Hollywood, FL. 33021
TITLE	D	61 TITLE	D XX Change ☐ Addition
NAME	JOHNSON, MYRTIS	62 NAME	NIVINS, Harvey
STREET ADDRESS	3510 HARRISON ST #14	63 STREET ADDRESS	3510 Harrison St. #10
CITY-ST-ZIP	HOLLYWOOD, FL 00000	64 CITY-ST-ZIP	Hollywood, FL. 33021

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)(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: Edith A. Haynes — EDITH A. HAYNES — 985-0364
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) — Date: 4/17/95 — Daytime Phone #

0036184