

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Apr 13, 1999 8:00 am**  
**Secretary of State**

04-13-1999 90019 022 \*\*\*\*61.25

003082

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 707577

1. Corporation Name

JEFFERSON PARK, INC., A CONDOMINIUM

Principal Place of Business

P.O. BOX 189013  
 1498 JEFFERSON AVE  
 PLANTATION FL 33318  
 US

Mailing Address

P.O. BOX 189013  
 1498 JEFFERSON AVE  
 PLANTATION FL 33318  
 US



2. Principal Place of Business

21 1498 Jefferson Ave

2a. Mailing Address

28 C/O: GALIANA Management

3. Date Incorporated or Qualified

07/13/1964

Suite, Apt. #, etc.

22 apt - 408

27 P.O. Box - 453436

4. FEI Number

59-1104478

Applied For

Not Applicable

City & State

23 Miami Beach Florida

City & State

28 Miami Florida

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Zip

24 33139

Country

25 USA

Zip

29 33139

Country

30 USA

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

JEFFERSON PARK CONDO ASSOC  
 C/O GALIANA MGMT SERV  
 P.O. BOX 453436  
 MIAMI FL 33245

10. Name and Address of New Registered Agent

81 Name GALIANA Management HILARY SHAN  
 82 Street Address (P.O. Box Number is Not Acceptable) 250 S.W. 21 Road  
 83 Miami  
 84 City miami FL 85 Zip Code 33129

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

*[Handwritten Signature]*

4/7/99

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
V	KELLEY, JAMES	1498 JEFFERSON AVE, 505-A	HALEAH FL 33139	<input type="checkbox"/>
SD	SANTANA, MARIA	1498 JEFFERSON AVE #408	MIAMI BEACH FL 33139	<input type="checkbox"/>
TD	BERNSTEIN, BERTHA	1498 JEFFERSON AVE., #206	MIAMI BEACH FL	<input checked="" type="checkbox"/>
PD	BORSKY, JAY	1498 JEFFERSON AVE APT 508-A	MIAMI BEACH FL 33139	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
	JAMES KELLEY	1498 Jefferson Ave. apt 505-A	Miami Beach, Florida 33139	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	PATRICIA PEKEIRA	1498 Jefferson Ave. apt 208	Miami Beach, Florida 33139	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	PAULA KOON	1498 Jefferson Ave. apt. 207	Miami Beach, Florida 33139	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	MARTINEZ alfredo	1498 Jefferson Ave. apt. 301	Miami Beach, Florida 33139	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	BORJA I BELY	1498 Jefferson Ave. apt. 308	Miami Beach, Florida 33139	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	BORSKY, JAY	1498 JEFFERSON AVE. APT. 508-A	MIAMI BEACH, FL 33139	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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, with all other like empowered.

SIGNATURE: *[Handwritten Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/99 305-854-238  
 Date Daytime Phone #

CR2F037-(11/99)