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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 7092

(3)

719 APARTMENT ASSOCIATION, INC.								
Principal Pla	ce of Business	Mailing Address			\$ 100010 10011 00110 19FFD 1101U 111	IAI (WOF BINI) OI	AN ALAKI BIRN BI	ON DIBLE SERI
719 EUGLID A MIAMI BEACH)							
					3. Date Incorporated or Qualifie 06/29/1965	d 3a. D	ate of Last Re 02/09/199	96
· · · · · ·	Place of Business	2a. Mailing Address			4. FEI Number 59-2604982			plied For
Suite, Apt	t # etc	Suite, Apt. #, etc.	·		38-2004302		\$8.75 A	t Applicable
22 27				<u> </u>	5. Certificate of Status Desired		Fee Re	
City & Sta	ate	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution		Added t	
Zip	Country	Zip	Country	j	8. This corporation has liability f			. 199.032,
24	25 9. Name and Address of Curr		10		Florida Statutes 10. Name and Address of New	Yes		
	5. Hame and Addition of Contr	AIL ITUGISCOIO A AGOIL	81 Na	ame	10. Hallio and Addition of Hon	1108101010	rigorit	
DELAN	OV. GEORGE						····	
DELANOY; GEORGE 719 EUCLID AVE #10			82 Str	reet Addres	s (P.O. Box Number is Not Accep	table)		,
APT. 7	OUD ATE FIN		83		······································			
MIAMI I	84 Cit	ih.			er 7in (Code		
	1 [•		FL	_ ' ' '			
office or agent. I SIGNATUR	It to the provisions of Sections 617.05 registered agent, or both, in the Sta am famility with, and accept the object of the state of t	(0-	thorized by the da Statutes.			cept the app	pointment as	registered
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTOR	IS IN 12
TITLE	PD	□ DECEPE	1.1 TITLE	1	RES.		Change	Addition
NAME	_BIRMAN, JACOB		1.2 NAME		OBEPH SILIGATO			
STREET ADDRESS	1 10		1.3 STREET ADDR	RESS 7	19 Evenio Ave #8			
CITY-SI-ZIP	-MIAMI BOHTE	Llociett	1.4 CITY-ST-ZIP			3139	D 0	A station of
TITLE	COLDDING—IIIDA	DELETE	21 TITLE		RES! DEAN NASH		Change	Addition
NAME STREET ADDRESS	-GOLDRING, JUDA*		2.2 NAME 2.3 STREET ADOR	0500	119 Evacio AVE#5			
CITY-ST-ZIP	MIAMI-BOH-FL		2.4 CITY-ST-ZIF		<i>*</i>	33139		ł
TITLE	B Sec.	DELETE	3.1 TITLE		c;	1 2 4	Change	Addition
NAME	DELANOY, GEORGE		3.2 NAME				•	Ì
STREET ADDRESS			3.3 STREET ADDR		EDRAE DELANOY			
CITY-ST-ZIP	MIAMI BCH FL 331;	59	3.4. CITY - ST - ZIF	P M	HAMIBEN FL 8	3139		
TITLE	MARCTON	DELETE	4.1 TITLE				Change	Addition
NAME	505EFVE 5146	30000	,4. 2 NAME	Ì]
STREET ADDRESS			4.3 STREET ADDR	ress				
CITY-ST-ZIP	MINHIBONCH, P	2. 33/37	4.4 CITY-ST-ZIP	P				A ALICE
TITLE	DIRECTOR	DELETE	5.1 TITLE				Change	Addition
NAME	TIG EVEND AG	K. 155	5.2 NAME					
STREET ADDRESS	THE RUCKUM	FL. 33/39	5.3 STREET ADDR					
CITY - ST - ZIP	A COLORED A	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	-	······································		Change	Addition
NAME	LVALCOOK		6.1 TILE				Permit Assertings	
Į	SECREL DELL	112 410	6.3 STREET ADDR	aree l				,
STREET ADDRESS	ITT KUCHIDA	VA , TO . 20	0.3 STREET ADD	111233				i

14. Ido 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 101 changed, or on an attachment with an address.

SIGNATURE:

NATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

for.

3/17/71

FILED

May 01 1997 8:00am

Secretary of State

Daytime Phone # 0027306