

FILE NOW: FILING FEE IS \$61.25

FILED

May 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 709715 (7)
1. Corporation Name
921 APARTMENT ASSOCIATION, INC.



Principal Place of Business: 921 MERIDIAN AVENUE #10 MIAMI BEACH FL 33139
Mailing Address: 921 MERIDIAN AVENUE #10 MIAMI BEACH FL 33139-8429

3. Date Incorporated or Qualified: 10/05/1965
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City, State, Zip, and Country.

4. FEI Number: 59-2059162
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes [], No [x]

9. Name and Address of Current Registered Agent: PARKER, SCOTT, 169 ADAMS PLACE, APT 48, PAHOKEE FL 33476

10. Name and Address of New Registered Agent (81-85): BERNARD BELITSKY, APT 12, 921 MERIDIAN AVE, MIAMI BEACH, FL 33139

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: BERNARD BELITSKY, DIR. (Signature) 4/28/97 (Date)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BELITSKY, NERNARD	
STREET ADDRESS	921 MERIDIAN AVE. #12	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	CASILLAS, JOSEFINA	
STREET ADDRESS	921 MERIDIAN AVE #8	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	FERNANDEZ, ABEL	
STREET ADDRESS	921 MERIDIAN AVENUE APT 6	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	PARKER, SCOTT	
STREET ADDRESS	169 ADAMS PLACE APT 46	
CITY-ST-ZIP	PAHAOKEE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	FRANK DELTORO
5.3 STREET ADDRESS	921 MERIDIAN AVE APT 1
5.4 CITY-ST-ZIP	MIAMI BEACH, FL 33139
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: BERNARD BELITSKY 11/20/07 305 673 4623

CR2E037 (9/96)