

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 710111 (6)
1. Corporation Name
BEACH MANOR CONDOMINIUM, INC.



Principal Place of Business Mailing Address
**% BEACH MANOR CONDOMINIUM
345 MICHIGAN AVENUE
MIAMI BEACH FL 33139**

3. Date Incorporated or Qualified **12/28/1965** 3a. Date of Last Report **04/19/1995**
4. FEI Number **59-1159534** 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**
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 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Zip Country 30

9. Name and Address of Current Registered Agent
**WACKER, MICHAEL A.
345 MICHIGAN AVENUE #29
MIAMI BEACH FL 33139**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
PD LEACH, DANIEL E. 345 MICHIGAN AVE #32 MIAMI BCH FL
VD PORRAS, JOSE V P.O. BOX 693452 MIAMI FL
VD WHEELER, MICHAEL P 345 MICHIGAN AVENUE #6 MIAMI BEACH FL
ST WACKER, MICHAEL A 315 FAIRWAY DRIVE MIAMI BEACH FL
ST MIROSLAVA UGALDE 345 MICHIGAN AVENUE #26 MIAMI BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE PD 1.2 NAME SEGUNDO GONZALEZ, SEGUNDO O. 1.3 STREET ADDRESS 2660 NW 18TH TERR. 1.4 CITY-ST-ZIP MIAMI, FL 33125
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
3.1 TITLE VD 3.2 NAME MIROSLAVA UGALDE 3.3 STREET ADDRESS 345 MICHIGAN AVE #26 3.4 CITY-ST-ZIP MIAMI BEACH, FL 33139
4.1 TITLE 4.2 NAME SANK 4.3 STREET ADDRESS 345 MICHIGAN AVE #29 4.4 CITY-ST-ZIP MIAMI BEACH, FL 33139
5.1 TITLE ST 5.2 NAME ARENAS, LISA 5.3 STREET ADDRESS 345 MICHIGAN AVE., #39 5.4 CITY-ST-ZIP MIAMI BEACH, FL 33139
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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)(k), 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: Michael A. Wacker 17 FEB 96 305-532-9412
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)