

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$165 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$395)**

NONPROFIT CORPORATION ANNUAL REPORT 1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 13 AM 9:23

DOCUMENT # 716074 (0)

1. Corporation Name
TELSTAR CONDOMINIUM, INC.

Principal Place of Business Mailing Address
1811 JEFFERSON STREET HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/18/1969	3a. Date of Last Report 03/25/1994
4. FEI Number 59-1364959	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	FILING FEE IS \$61.25
8. This corporation has liability for intangible tax under s. 199.037, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent
**SERRURIER, ALAN
1811 JEFFERSON STREET
APT. 210
HOLLYWOOD FL 33020**

10. Name and Address of New Registered Agent	
B1 Name	SAME
B2 Street Address (P.O. Box Number is Not Acceptable)	1811 Jefferson St. Apartment 210
B3	
B4 City	Hollywood FL
B5 Zip Code	33020

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 _____ DATE _____
Signature, typed or printed name of registered agent and the 4 applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	SERRURIER, ALAN
STREET ADDRESS	1811 JEFFERSON ST., APT. 210
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	VD
NAME	LACASSEE, ANDRE
STREET ADDRESS	1811 JEFFERSON ST., APT. 807
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	SD
NAME	DENHAM, MARY
STREET ADDRESS	1811 JEFFERSON STREET, APT. #710
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	TD
NAME	KROPINAK, ANN
STREET ADDRESS	1811 JEFFERSON STREET, APT. #703
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	D
NAME	REINKE, DENNIS
STREET ADDRESS	1811 JEFFERSON ST., APT 709
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	D
NAME	PAGE, JOSEPH
STREET ADDRESS	1811 JEFFERSON STREET, APT. #401
CITY - ST - ZIP	HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	SAME
13 STREET ADDRESS	1811 Jefferson St -- Apt. 210
14 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	SAME
23 STREET ADDRESS	
24 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	SAME
33 STREET ADDRESS	
34 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	SAME
43 STREET ADDRESS	
44 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	SAME
53 STREET ADDRESS	
54 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	Director THOMAS RAMBO
63 STREET ADDRESS	NEEL JAY GARDNER STORAP Apartment 808
64 CITY - ST - ZIP	Hollywood FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption provided in Section 110.07(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: MARY DENHAM Date: June 6, 1995
SIGNATURE AND TYPED PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Telephone: 305-927-2722

CR2E037 (3/95)