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Apr 09 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 # 725806 (4)

1. Corporation Name
JOE RON NORTH CONDOMINIUM, INC.



Principal Place of Business Mailing Address
2633 PIERCE STREET 2633 PIERCE STREET
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020-3886

3. Date Incorporated or Qualified 03/13/1973
3a. Date of Last Report 01/31/1996

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

4. FEI Number 59-1548965
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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HORULKO, ALEX
2633 PIERCE ST
#105
HOLLYWOOD FL 33020

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	COACHE, JEAN GUY	
STREET ADDRESS	2633 PIERCE ST	
CITY-ST-ZIP	HOLLYWOOD, FL 00000	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	POSTNIKOFF, JEANETTE	
STREET ADDRESS	2633 PIERCE ST	
CITY-ST-ZIP	HOLLYWOOD, FL 00000	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	HORULKO, ALEX	
STREET ADDRESS	2633 PIERCE ST #105	
CITY-ST-ZIP	HOLLYWOOD, FL 00000 33020	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CERVERA, MARTHA	
STREET ADDRESS	4121 STIRLING RD #407	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GORDON, EDWIN, G	
STREET ADDRESS	2633 PIERCE ST.	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BOUFFORD, JEAN	
STREET ADDRESS	2633 PIERCE ST.	
CITY-ST-ZIP	HOLLYWOOD FL	

1.1 TITLE	Pres.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	EDWARD CONNORS	
1.3 STREET ADDRESS	2633 PIERCE ST. #102	
1.4 CITY-ST-ZIP	HOLLYWOOD, FL. 33020	
2.1 TITLE	V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	RICHARD MACALUSO	
2.3 STREET ADDRESS	2633 PIERCE ST. #108	
2.4 CITY-ST-ZIP	HOLLYWOOD, FL. 33020	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	GERTRUDE DELLAPIETRO	
4.3 STREET ADDRESS	2633 PIERCE ST. #104	
4.4 CITY-ST-ZIP	HOLLYWOOD, FL. 33020	
5.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	ANNA PEREIRA	
5.3 STREET ADDRESS	2633 PIERCE ST. #101	
5.4 CITY-ST-ZIP	HOLLYWOOD, FL. 33020	
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 _____ DATE 4/1/97

CR2E037 (9/96)