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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 730375

1. Corporation Name

MERIDIAN HOUSE CONDOMINIUM ASSOCIATION, INC.

293913 - 90058 - 7

Principal Place of Business

1540 MERIDIAN AVE.
MIAMI BEACH FL 33139
US

Mailing Address

1540 MERIDIAN AVE.
MIAMI BEACH FL 33139
US



2. Principal Place of Business

21 1540 Meridian Ave

Suite, Apt. #, etc. office apt.

22 (Miami) Bch Florida

23 Zip 33139 Country USA

24 33139 25 USA

2a. Mailing Address

26 1540 Meridian Ave

Suite, Apt. #, etc. office apt.

27 (Miami) Bch Florida

28 Zip 33139 Country USA

29 33139 30 USA

3. Date Incorporated or Qualified

08/05/1974

4. FEI Number

59-1641706

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

TOMAS, VALDES
1540 MERIDIAN AVE.
#3B
MIAMI BCH 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, if 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

[Handwritten Signature]

(Signature typed below the name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

3/31/99

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME VALDES, THOMAS

STREET ADDRESS 1540 MERIDIAN AVE 38

CITY-ST-ZIP MIAMI BEACH FL

TITLE DELETE

NAME MARTINEZ, YOLANDA

STREET ADDRESS 1540 MERIDIAN AVE #4H

CITY-ST-ZIP MIAMI BCH FL

TITLE DELETE

NAME MARSAN, MARTA

STREET ADDRESS 1540 MERIDIAN AVE., #3J

CITY-ST-ZIP MIAMI BCH FL

TITLE DELETE

NAME GARCIA, EVELIO

STREET ADDRESS 1540 MERIDIAN AVE #3H

CITY-ST-ZIP MIAMI BCH FL

TITLE DELETE

NAME ALVARINO, JOSE MANUEL

STREET ADDRESS 1540 MERIDIAN AVE #3-E

CITY-ST-ZIP MIAMI BCH FL 33139

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP Change Addition

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP Change Addition

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP Change Addition

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP Change Addition

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP Change Addition

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 supplementary 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 its 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, with all other like empowered.

SIGNATURE:

[Handwritten Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/99

305-854-2138

Date

Daytime Phone #

CR2E037-11/98