

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 732637 (4)

1. Corporation Name
LAGUNA CLUB CONDOMINIUM, INC.



Principal Place of Business		Mailing Address	
508 NW 107 AVE MIAMI FL 33172		2151 LE JEUNE RD. SUITE 305 CORAL GABLES FL 33134 06	
21	2. Principal Place of Business	26	2a. Mailing Address
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	28	City & State
24	Zip	29	Country
25	Country	30	Country

3. Date Incorporated or Qualified
05/01/1975

4. FEI Number
59-1688761

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**SPM GROUP, INC.
2151 LEJEUNE RD.
SUITE 305
CORLA GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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 *[Signature]* DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CASTILLO, JAVIER	1.2 NAME	
STREET ADDRESS	508 NW 109 AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33172	1.4 CITY-ST-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STILL, MILDRED B	2.2 NAME	
STREET ADDRESS	508 NW 109 AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33172	2.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARBALLO, ROBERTO	3.2 NAME	<i>Norma Manteca</i>
STREET ADDRESS	508 NW 109 AVE.	3.3 STREET ADDRESS	<i>322 NW 107 ave. # 4</i>
CITY-ST-ZIP	MIAMI FL 33172	3.4 CITY-ST-ZIP	<i>Miami, FL 33172</i>
TITLE	SD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CALZADILLA, FELICIA	4.2 NAME	<i>SD Axel Mendoza</i>
STREET ADDRESS	508 NW 109 AVE.	4.3 STREET ADDRESS	<i>404 NW 107 ave. #10</i>
CITY-ST-ZIP	MIAMI FL 33172	4.4 CITY-ST-ZIP	<i>Miami, FL 33172</i>
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MESAS, JOSE	5.2 NAME	<i>D Humberto Bustos</i>
STREET ADDRESS	508 NW 107 AVE.	5.3 STREET ADDRESS	<i>513 NW 109 ave. #5</i>
CITY-ST-ZIP	MIAMI FL 33172	5.4 CITY-ST-ZIP	<i>Miami, FL 33172</i>
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAENZ, JESSICA	6.2 NAME	
STREET ADDRESS	508 NW 109 AVE.	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33172	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 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, changed, or on an attachment with an address.

SIGNATURE: *Javier Castillo president. Javier Castillo* 3/5/98 - (305) 293-6502

CR2E037 (10/97)