SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	ANNUAL REPORT 1997		Secretary of State DIVISION OF CORPORATIONS			Secretary of State			
D 1.	OCUM Corporation N	ENT #	733047	(5)					
	FOREST (COVE AS	SOCIATION, INC	•					
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Pri	ncipal Place o	f Business		Mailing Address	ling Address			IEI DIEN BIEN EN BIEN BIEN E	
	SW 54 LANE			6604 SW 54 LANE	The second secon				
lson.	TH MIAMI FL 3	33155-6413		SOUTH MIAMI FL 33155-641	13		DO NOT WRITE		
						3. D	ate Incorporated or Qualified 06/13/1975	3a. Date of Last F 04/28/19	
	Principal Plac	e of Busines	s	2a. Mailing Address		4. FE	I Number	· · · · · · · · · · · · · · · · · · ·	pplied For
21				26			59-1589832		ot Applicable
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.		5 . C	ertificate of Status Desired		Additional equired
ľ	City & State			City & State			ection Campaign Financing		May Be
23	Zip	·	Country	Zip	Country		ust Fund Contribution	☐ Added	to Fees
24	Σiþ	25	Country	⊢ '	Country 30		nis corporation owes or has pa ersonal Property Tax due June		tangible DNo
9. Name and Address of Current Registered Agent							ame and Address of New Re		
DUDANO NINATIO					81 Name	DAVED	PONTIFE		
RHOADS, PHYLLIS 6645 S.W. 55TH LANE							Box Number Is Not Acceptab	ole)	
S. MIAMI FL 33155					63		- J	-	
X CO					84 City			 85 Zip	Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the al office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of Section 617.0508, Florida Stat						Corporation S	Uhmite this statement for the n	- FL 33,	سرس ا
'''	office or regis	stered agent	l, or both, in the State of	of Florida. Such change were a tions of Rection 6179608. Florida.	authorized by the corporate Statutes	poration's boa	rd of directors. I hereby accep	of the appointment as	registered
SIG	NATURE		ーノーノベ	Fift (David C.	Postit	7	7/29/9-	7
12.		nature, typed or p	rinled name of registered agen OFFICERS AND		: Registered Agent signature		nstating) DITIONS/CHANGES TO OFFIC	CATE	
TITLE		7 0	OTTOCHOTHE	DELETE	1.1 TITLE	PD	OTTOMS/CHANGES TO OFFIC	ENS KIYD DINECTOR	C IN 10
NAM	I .	RHOADS, P				PD		Change	S IN 12
	I .			`	1.2 NAME	PONTI	FF. DAVID	- 7	
TITUE		845 S.W.	55TH LANE	,	1.3 STREET ADDRESS	PONTI 6680	FF, DAVID SWSS LAME		
		MIAMI FL	55TH LANE	□ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PONTI 6680	FF, DAVID SWSS LAME AMI, FL 331	٠	Addition
NAM	E C	MIAMI FL	55TH LANE 33155	DELETÉ	1.3 STREET ADDRESS	6680 S. MI	AMI, PL 331		
NAM	E [S MIAMI FL O (UVIN, KRIS 18565 S.W. (55TH LANE 33155 STIN 55TH LANE	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	PONTI 6680 S. MI Ouke 6670	<u>AMI, PU 331</u> .VAN SWSYLN	٠	Addition
NAM Stre City	E C HE K EET ADDRESS 6 '-ST-ZIP S	S MIAMI FL) (UVIN, KRIS 1565 S.W. (S MIAMI FL	55TH LANE 33155 STIN 55TH LANE	_	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	PONTI 6680 S. MI Ouke 6670 Milm	FF, DAVID SW ST LAME AMI, PL 331 Van SWSULN I FL 33155	Change	Addition Addition
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NAM STRE CITY TITLE NAM	E C HE K SEET ADDRESS 6 '-ST-ZIP S E T	S MIAMI FL O (UVIN, KRIS 3565 S.W. S MIAMI FL D ROSSELL, (55TH LANE 33155 STIN 55TH LANE 33155 GUILLERMO	_	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	PONTI 66 80 S. MI Dake 66 70 Milm Deiss	Ami, pr 331 Swsuln i FL 33155 s Harold	Change	Addition Addition
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14. I do hereby certify that the information supplied with this filling 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, orion an attachment with an address.

FILED

Aug 06 1997 8:00am