

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Feb 11, 1999 8:00am**  
**Secretary of State**

02-11-1999 90030 014 \*\*\*\*\*61.25

NONPROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



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

**DOCUMENT # 735271**

1. Corporation Name

**THE WILSHIRE CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business  
 1250 NE MIAMI GARDENS DR.  
 N MIAMI BCH. FL 33179-1704

Mailing Address  
 1250 NE MIAMI GARDENS DR.  
 N MIAMI BCH. FL 33179-1704



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		03/15/1976	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1673299	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip Country		Zip Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
24		29		30	
				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BECKER, POLIAKOFF & STREITFELD**  
 3111 STIRLING RD.  
 FT. LAUDERDALE FL 33312-3525

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALLACE, NORMAN	1.2 NAME	
STREET ADDRESS	1250 NE MIAMI GRDNS DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BCH FL	1.4 CITY-ST-ZIP	
TITLE	DP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MELTZER, EVELYN	2.2 NAME	
STREET ADDRESS	1250 NE MIAMI GRONS DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BCH FL	2.4 CITY-ST-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WULKAN, JACK	3.2 NAME	
STREET ADDRESS	1250 NE MIAMI GRDNS DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BCH FL	3.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENSON, NAOMI	4.2 NAME	
STREET ADDRESS	1250 NE MIAMI GRDNS DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BCH FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jack Wulkan* **REQUIRED**

1-21-99

305-947-1418

CR2E037 (11/98)