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Apr 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 737518 (1)
1. Corporation Name
MARBELLA TOWER OWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address

200 178TH DRIVE SUNNY ISLES NORTH MIAMI BEACH FL 33160 US

200 178TH DRIVE SUNNY ISLES NORTH MIAMI BEACH FL 33160 US

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

3. Date Incorporated or Qualified
12/13/1976

4. FEI Number
59-2239890

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

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

GRAZIADEI, WILLIAM
200 178TH DRIVE, SUITE #307
SUNNY ISLES
NORTH MIAMI BEACH FL 33160

10. Name and Address of New Registered Agent

81 Name FRANK A LOPRESTI
82 Street Address (P.O. Box Number is Not Acceptable) 200-178TH DRIVE
83 APT 710
84 City Sunny Isles FL 85 Zip Code 33160

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 FRANK A LOPRESTI President Frank A Lopresti March 15th 1998
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when appointing) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	GRAZIADEI, WILLIAM	
STREET ADDRESS	200 178TH DRIVE #307	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	
TITLE	BD	<input checked="" type="checkbox"/> DELETE
NAME	WEATHERFORD, LINDA	
STREET ADDRESS	200-178TH DRIVE #502	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	COSCIA, ANTHONY	
STREET ADDRESS	200-178TH DRIVE, #401	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	
TITLE	BD	<input type="checkbox"/> DELETE
NAME	ALSOP, R. JEFFREY	
STREET ADDRESS	200 178TH DRIVE #402	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	
TITLE	BD	<input checked="" type="checkbox"/> DELETE
NAME	FORTIN, YOLANDE	
STREET ADDRESS	200 178TH DRIVE #409	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	FERLITO, MARIA SHIRLEY	
STREET ADDRESS	200-178TH DRIVE, #605	
CITY-ST-ZIP	MIAMI BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	FRANK A LOPRESTI	
1.3 STREET ADDRESS	200-178TH DRIVE # 710	
1.4 CITY-ST-ZIP	SUNNY ISL, FLA 33160	
2.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	AUGUSTINO TRIDICO	
2.3 STREET ADDRESS	200-178TH DRIVE # 701	
2.4 CITY-ST-ZIP	SUNNY ISLES, FLA 33160	
3.1 TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ROSE SORRENTINO	
3.3 STREET ADDRESS	200-178TH DRIVE # 411	
3.4 CITY-ST-ZIP	SUNNY ISL, FLA 33160	
4.1 TITLE	BD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	FRED GREENE	
4.3 STREET ADDRESS	200-178TH DRIVE # 609	
4.4 CITY-ST-ZIP	SUNNY ISL, FLA 33160	
5.1 TITLE	BD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	KIM TASSIELLO	
5.3 STREET ADDRESS	200-178TH DRIVE # 501	
5.4 CITY-ST-ZIP	SUNNY ISL, FLA 33160	
6.1 TITLE	BD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	FRANK ORTONE	
6.3 STREET ADDRESS	200-178TH DRIVE # 505	
6.4 CITY-ST-ZIP	SUNNY ISL, FLA 33160	

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.

SIGNATURE: FRANK A LOPRESTI Frank A Lopresti March 15, 98 9331842

CR2E037 (10/97)