

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 06, 1999 8:00 am  
Secretary of State

03-06-1999 90056 035 \*\*\*\*61.25

0967200

NONPROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # 746396

1. Corporation Name

1900 MERIDIAN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1900 MERIDIAN AVE  
MIAMI BEACH FL 33139

Mailing Address

1900 MERIDIAN AVE  
BOARD MAIL BOX (CONDO)  
MIAMI BEACH FL 33139  
US

1900 MERIDIAN AVENUE

1900 MERIDIAN AVENUE



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

03/22/1979

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-2018313

Applied For

Not Applicable

22 CONDO MAIL BOX

27 CONDO MAIL BOX

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 MIAMI BEACH, FLORIDA

28 MIAMI BEACH, FLORIDA

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 33139

25 DADE

29 33139

30 DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRANDA, JUAN  
1900 MERIDIAN AVE.  
MIAMI BEACH FL 33139

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, 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2/22/99  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  DELETE  
NAME DT  
STREET ADDRESS SCHNAIDER, BORIS  
CITY-ST-ZIP 1900 MERIDIAN AVE.  
MIAMI BCH FL 33139

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE  DELETE  
NAME DP  
STREET ADDRESS GRANADA, MIRTA  
CITY-ST-ZIP 1900 MERIDIAN AVE  
MIAMI BCH FL 33139

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  DELETE  
NAME DS  
STREET ADDRESS GOMEZ, AIDA  
CITY-ST-ZIP 1900 MERIDIAN AVE  
MIAMI BEACH FL 33139

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  DELETE  
NAME D  
STREET ADDRESS GONZALEZ, GISELA  
CITY-ST-ZIP 1900 MERIDIAN AVE  
MIAMI BEACH FL 33139

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

Date

Daytime Phone #

2/22/99

CR2E037 (11/98)