

FILE NOW: FILING FEE IS \$61.25

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May 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 752648 (6)
1. Corporation Name
SAMARI LAKE VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business % TROPICANA REALTY 3742 W 12TH AVENUE HIALEAH FL 33012	Mailing Address % TROPICANA REALTY 3742 W 12TH AVENUE HIALEAH FL 33012-4126
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3. Date Incorporated or Qualified 05/28/1980	3a. Date of Last Report 04/24/1996
4. FEI Number 59-2386421	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent HERNANDEZ, HENRY 3742 WEST 12TH AVENUE HIALEAH FL 33012	10. Name and Address of New Registered Agent B1 Name HENRY HERNANDEZ B2 Street Address (P.O. Box Number is Not Acceptable) 2011 WEST 62 ST. B3 B4 City HIALBAH FL B5 Zip Code 33016
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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 617.0502, Florida Statutes.

SIGNATURE: *Henry Hernandez* DATE: **4-22-97**
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	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ABREU, ALBERTO	1.2 NAME	
STREET ADDRESS	6190 NW 99 ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH GARDENS FL	1.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONZALEZ, ENRIQUE	2.2 NAME	
STREET ADDRESS	8185 N.W. 98TH TERR	2.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH GARDENS FL	2.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALDEZ, LUCY	3.2 NAME	
STREET ADDRESS	9791 NW 82 AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH GARDENS FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		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 do 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: *[Signature]* DATE: **4-22-97** (305) 558-9820

CR2E037 (9/96)