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NONPROFIT CORPORATION ANNUAL REPORT



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

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DOCUMENT # 754450

(5)

INTERNATIONAL LAKE CONDOMINIUM ASSOCIATION, INC.		I HAARIN INAAN ANN ARAN ARAN ARAN	TRU TIBU BARU BARU BARU BARU B	BIL BALSI (CO)		
Principal Place	of Business	Mailing Address			ABIA BIBIH BABIH BIBIH BIBIH BI	
815 NW 57TH AVE., STE. 302 MIAMI FL 33126		815 NW 57TH AVE. ST MIAMI FL 33126 US	E 429			
US				3. Date Incorporated or Qualified 10/02/1980	3a. Date of Last Re 02/13/199	•
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	······································	plied For
	N. Bayshore Drive	26 1717 N.Ca	yshore Drive	59-2430087		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	
City & State		City & State	١		- Fee He	•
23 Man			FL	Election Campaign Financing Trust Fund Contribution	□ \$5.00 Added t	•
Zip	Country	Zip	Country	This corporation has liability for in		
24 3313		29 33132	30 Dace	Florida Statutes] Yes □ No	
	9. Name and Address of Current	Registered Agent	81 Name _	10. Name and Address of New R	egistered Agent	
815 NW STE 129 MAMI FI	L 33126		83 84 City [1]	Iam l	FL 85 Zpc 321	O /
11. Pursuant to or register	to the provisions of Sections 617.0502 a ed agent, or both, in the State of Florida	and 617.1508, Florida Statut a. Such change was authoriz	es, the above named corpor ed by the corporation's boar	ation submits this statement for the purp d of directors. I hereby accept the appo	pose of changing its reg intraent as registered as	istered office gent. I am
tamil ar wit	th, and accept the obligations of section	on 617.0503, Florida Statutes	S	, ,	whole	
	Signature, type to or partied name of registered agent at		TE Registered Agent signature required		13/5 6	
TITLE	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI		
NAME	SD V Deluque, ada	Opere	1.1 TITLE 1.2 NAME		Change	Addition
STREET ADDRESS	2228 SW 122 AVE		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33175		14 CITY-SI-ZIP			
TITLE	TD	DELETE	2 1 TITLE		☐ Change	Addition
NAME	ROMERO, SILVIO		2.2 NAME			
STREET ADDRESS	2218 SW 122 AVE.		2 3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33175	m ber exe	2 4 CITY-ST-ZIP			
TITLE	PD	DELETE	31 TITLE		☐ Change	Addition
NAME STREET ADDRESS	ALONSO, LUIS L 345 OCEAN DR. #606		3.2 NAME			
CITY-ST-ZIP	MIAMI BCH. FL 33139		3 3 STREET ADDRESS 3 4 CITY-ST-ZIP			
TITLE	D	DELETE	41 TITLE		☐ Change	Addition
NAME	PICO, FRANCISCO		4 2 NAME		_ ,	_
STREET ADDRESS	12219 SW 24 TERR UNIT 26		4 3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP			
TITLE	D	DELETE	51 TITLE		Change	Addition
NAME	ORTIZ, HENRY		5 2 NAME			
STREET ADDRESS	122175 SW 24 TERR UNIT 25		5 3 STREET ADDRESS			
TITLE	MIAMI FL	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change	Addition
NAME		Doccere	6.2 NAME		□ oumige	radiilon
STREET ADDRESS			6 3 STREET ADDRESS			
CITY-ST-ZIP			6 4 CITY-ST-ZIP			
certify that	y certify that the information supplied w the information indicated on this annual I am an officer or director of the corpora Block 12 or Block 13 if changed, or or	al report or supplemental ann	ual report is true and accurate encourers	te and that my signature shall have the s s report as required by Chapter 617, Flo	same legal effect as if morida Statutes; and that r	ade under
SIGNAT	URF. MALLA	;		1/29/96 60	-1261-4110	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR