


FILE NOW: FILING FEE IS \$61.25

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Mar 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N01750 (1)
1. Corporation Name
THE FOUR STAR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
1770 WEST 38TH PLACE 1770 WEST 38TH PLACE
HIALEAH FL 33012-7072 HIALEAH FL 33012-7072
US US

3. Date Incorporated or Qualified 03/02/1984
3a. Date of Last Report 08/14/1996

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

4. FEI Number 26-5764992 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
PEREZ ANDRES
1770 W 38 PLACE
HIALEAH FL 33012

10. Name and Address of New Registered Agent
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) DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	PEREZ, ANDRES
STREET ADDRESS	1770 W 38 PLACE
CITY-ST-ZIP	HIALEAH FL
TITLE	STD <input type="checkbox"/> DELETE
NAME	PEREZ, RAMONA
STREET ADDRESS	1770 W 38 PLACE
CITY-ST-ZIP	HIALEAH FL
TITLE	VP <input type="checkbox"/> DELETE
NAME	CARMEN PEREZ
STREET ADDRESS	1770 W 38 PL
CITY-ST-ZIP	HIALEAH FL
TITLE	ANDRES PEREZ TRUSTEE <input type="checkbox"/> DELETE
NAME	ANDRES PEREZ
STREET ADDRESS	1770 W 38 PL
CITY-ST-ZIP	HIALEAH FL 33012
TITLE	ANDRES PEREZ TRUSTEE <input type="checkbox"/> DELETE
NAME	ANDRES PEREZ
STREET ADDRESS	1770 W 38 PL
CITY-ST-ZIP	HIALEAH FL 33012
TITLE	ANDRES PEREZ TRUSTEE <input type="checkbox"/> DELETE
NAME	ANDRES PEREZ
STREET ADDRESS	1770 W 38 PL
CITY-ST-ZIP	HIALEAH FL 33012

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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]* 2/1/97 825 365

CR2E037 (9/96)