

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1991



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Read Instructions on Other Side Before Making Entries
FILING FEE OF \$61.25 REQUIRED

1 Name and Mailing Address of Corporation: **DOCUMENT # N16599**
ZIP + 4 PRESORT
THE TRIUM HOMES AT THE HAMMOCKS HOMEOWNERS
C/O MIAMI MANAGEMENT, INC. ASSOCIATION, INC.
11941 S.W. 144TH ST.
MIAMI, FL 33186-6110

2 If a Street in Block 2 is an official one, write in the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.
21 Street Address
22 P.O. Box No.
23 City and State
24 Zip Code

3 Date Incorporated or Qualified To Do Business in Florida: **12/20/1985**
4 FEI Number: **59-2683226**
5 **\$8.75 Additional Fee required for a Certificate of Status**

6 Names and Street Addresses of Each Officer and Director (Do not use any corporation's or trust account number reported in Item 4)

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do not list P.O. Office Box Numbers)	City and State
P/D	LIPSCOMB, MARK	15562 SW 111 TERR.	MIAMI, FL
D	LIPSCOMB, MARK	15562 S.W. 111 TERR.	MIAMI, FL
V/D	FROST, FRED	10961 SW 155TH PLACE	MIAMI, FL
P/D	FROST III, FREDERICK	10961 S.W. 155 PLACE	MIAMI, FL
T/D	ELALOUF, ADRIENNE	15560 SW 111 TERR.	MIAMI, FL
S/D	KINSORA-JOSEPH, PEGGY	15566 SW 111 TERR.	MIAMI, FL
D	SANCHEZ, CARLOS	11060 SW 155 PLACE	MIAMI, FL
V/D	MEYERS, SANDRA	10931 S.W. 155 PLACE	MIAMI, FL
D	MCPHERSON, JOHN R.	10951 SW 155 PLACE	MIAMI, FL

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent
TRIAY, CARLOS A., ESO.
250 BIRD RD.
SUITE 301
CORAL GABLES, FL. 33146

8 Part of the provisions of Sections 607.01(2) and 607.01(3) A, Florida Statutes, require that a corporation or trust file a statement of its registered agent's name and address with the Department of State. This office is responsible for both the State of Florida's Secretary of State and the Department of State's Office of Corporate Services. It is hereby a part of the appointment as registered agent in Florida with the Department of State.

SIGNATURE _____ (Registered Agent Accepting Appointment) DATE _____

10 I certify that the information indicated in this statement of my corporation is true and correct and that I am a resident of the State of Florida and have been duly qualified as a registered agent under both the Florida Statutes and the Florida Constitution. I am a resident of the State of Florida and have been duly qualified as a registered agent under both the Florida Statutes and the Florida Constitution. I am a resident of the State of Florida and have been duly qualified as a registered agent under both the Florida Statutes and the Florida Constitution.

SIGNATURE *Frederick W. Frost III* DATE **4-2-71**
Typed Name of Signing Officer or Director: **Frederick W. Frost III** Title: **President**
Telephone Number (Daytime): **(305) 386-5347**

FILING FEE OF \$61.25 REQUIRED—Make Checks Payable To: Secretary of State \$8.75 Additional Fee required for a Certificate of Status