

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR -4 AM 10:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N17195** (1)

Corporation Name
CARMEL AT THE CALIFORNIA CLUB CONDOMINIUM '29' ASSOCIATION, INC.

Principal Place of Business Mailing Address
~~8200 CORAL WAY~~ ~~6219 CORAL WAY~~
~~MIAMI FL 33155~~ ~~MIAMI FL 33155~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/07/1986** 3a. Date of Last Report **04/28/1994**
4. FEI Number **59-2725753** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 **D.C.I.** 26 **D.C.I.**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **2901 Simms Street** 27 **2901 Simms Street**
City & State City & State
23 **Hollywood, FL** 28 **Hollywood, FL**
Zip Country Zip Country
24 **33020** 25 **Broward** 29 **33020** 30 **Broward**

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~PROTUONDO, JULIO GONZALEZ~~
~~8200 CORAL WAY~~
~~MIAMI FL 33155~~

81 Name **Andrew Meyrowitz**
82 Street Address (P.O. Box Number is Not Acceptable) **c/o D.C.I.**
83 **2901 Simms Street**
84 City **Hollywood** 85 Zip Code **FL 33020**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE **3/29/95**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	PECHENK, JENNIFER
STREET ADDRESS	903 N.E. 199 ST. #206
CITY - ST - ZIP	MIAMI FL
TITLE	VD
NAME	RUBENSTEIN, RHONDA
STREET ADDRESS	903 N.E. 199 ST
CITY - ST - ZIP	MIAMI FL
TITLE	STD
NAME	BLUSTEIN, M.
STREET ADDRESS	903 N.E. 199 ST
CITY - ST - ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: *Jennifer Pechenk* **President** DATE: **3/25/95** FILING FEE: **(305) 770-1314**
Signature and typed or printed name of signing officer or director