FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 16, 1999 8:00 am Secretary of State 03-16-1999 90154 001 ****70.00

DOCUMENT # N19673

1. Corporation KENDALI ATION, II	PINES COMMERCE CENT	ER CONDOMINIUM AS	SOCI				
Principal Place	of Business	Mailing Address					
12236 SW 132ND COURT 13000 S.W. 120TH ST MIAMI FL 33186 US							
2. Principal Pl	ace of Business	2a. Mailing Address			3. Date incorporated or Qualifed		
21 26					03/13/1987		
Suite, Apt. #, etc. Suite, Apt. #, etc.					4 FEI Number Applied For S9-2685546 Not Applicable		
22 27 27 City & State City & State					\$8.75 Additional		
City & State	9 .	28			5. Certificate of Status Desired Fee Required		
Zip	Country	Zip	Country		6. Election Campaign Financing \$5.00 May Be		
24			10		Trust Fund Contribution Added to Fees		
<u></u>	9. Name and Address of Curren				10. Name and Address of New Registered Agent		
			81	Name	ne ·		
FROYO, M. IVANKA 13000 SW 120 ST.			82	Street	Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33186			83 84 City				
					85 ≂Zip Code		
			-	·	FL T		
agent. I ar	m familiar with, and accept the obligation of segment to see the obligation of segments agent to the segment of segments agent to the obligation of segments agent the obligation of segments agent the obligation of segments agent the obligation of segments are segments.	it and title if applicable. (NOTE: I	Registered Ager		ed corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered in the required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	V OFFICE OF OFFI	WADELEIE	1.1 TITLE				
NAME	GERGORA, GEORGE		1.2 NAME	ADDRESS	00		
STREET ADDRESS	12222 SW 132 CT		1.4 CITY-S		33		
CITY-ST-ZIP TITLE	MIAMI FL 33186 TD	☐ DELETE	2.1 TITLE	1-21	☐ Change ☐ Addition		
NAME I	KERLEW, DONALD	_	2.2 NAME				
STREET ADDRESS	12236 SW 132 CT		2.3 STREET	ADDRESS	ss		
CITY-ST-ZIP	MIAMI FL 33186		2.4 CITY-S	T-ZIP			
TITLE	PD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition		
NAME	VISSCHERS, RUDY		3.2 NAME				
STREET ADDRESS	12210 SW 132ND CT		3.3 STREE	TADORESS	ss		
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP		☐ Change ☐ Addition		
TITLE	D	☐ DELETE	4.1 TITLE		Change Addition		
NAME	VON, BILL		4. 2 NAME				
STREET ADDRESS	12206 S.W. 132ND COURT			T ADDRESS			
TITLE	MIAMI FL 33186	☐ DELETE	4.4 CITY-S 5.1 TITLE	1-212	Director □ Change □ Addition		
NAME			5.2 NAME		Goins, Barbara		
STREET ADDRESS			5.3 STREE	T ADDRESS	10006 0 11 100 1 00		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP	Miami= FL 33186		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition		
NAME			6.2 NAME		· ·		
STREET ADORESS			6.3 STREE	TADDRESS	ss		
City+St-ZiP			6.4 CITY-S				
indicated officer or	on this applied report or supplements	l annual report is true and accur iver or trustee empowered to ex	ate and tha ecute this r	t my sigr eport as	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information ignature shall have the same legal effect as if made under oath; that I am an as required by Chapter 617, Florida Statutes; and that my name appears in stred.		