

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N29276 (5)

1. Corporation Name

GATEWAY OFFICE/TECH CONDOMINIUM ASSOCIATION V. I
NC.



Principal Place of Business

Mailing Address

4936 S.W. 74TH COURT
MIAMI FL 33155

7487 SW 50TH TERR
MIAMI FL 33155
US

3. Date Incorporated or Qualified

11/14/1988

3a. Date of Last Report

02/27/1995

4. FEI Number

65-0142023

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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCNAMARA, RUSSELL
7475 S.W. 50TH TERRACE
MIAMI FL 33155

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME MCNAMARA, RUSSELL G
STREET ADDRESS 7475 S.W. 50TH TERRACE
CITY-ST-ZIP MIAMI FL

1.1 TITLE President ☒ Change ☒ Addition
1.2 NAME Stuart Harries
1.3 STREET ADDRESS 7463 SW 50 Terrace
1.4 CITY-ST-ZIP Miami, FL 33155

TITLE VD ☐ DELETE
NAME HULL, CHARLES
STREET ADDRESS 7487 SW 50 TERRACE
CITY-ST-ZIP MIAMI FL

2.1 TITLE Treasurer ☒ Change ☐ Addition
2.2 NAME Charles Hull
2.3 STREET ADDRESS 4961 SW 75 Avenue
2.4 CITY-ST-ZIP Miami, FL 33155

TITLE STD ☐ DELETE
NAME KHULY, JORGE
STREET ADDRESS 7487 SW 50 TERRACE
CITY-ST-ZIP MIAMI FL

3.1 TITLE Enrique Lopez ☐ Change ☒ Addition
3.2 NAME Vice President
3.3 STREET ADDRESS 4918 SW 74th Ct.
3.4 CITY-ST-ZIP Miami, FL 33155

TITLE TD ☐ DELETE
NAME DEAGUIAR, ANNA
STREET ADDRESS 4907 SW 75 AVENUE
CITY-ST-ZIP MIAMI FL

4.1 TITLE Secretary ☐ Change ☒ Addition
4.2 NAME David Price
4.3 STREET ADDRESS 7487 SW 50th Terrace
4.4 CITY-ST-ZIP Miami, FL 33155

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 119.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/15/96 305-663-1777

CR2E037 (12/95)