

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 10 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N34460 (8)**  
1. Corporation Name  
**ALAMEDA TOWER 6 CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business <b>5500 &amp; 5560 W. 21 CT. HIALEAH FL 33016</b>		Mailing Address <b>PO BOX 559063 P. O. BOX 559063 MIAMI FL 33255-9063 US</b>	
2. Principal Place of Business	2a. Mailing Address		
21 Suite, Apt. #, etc.	26 <b>UNLIMITED MANAGEMENT</b>		
22 City & State	27 Suite, Apt. #, <b>SERVICES INC.</b>		
23 Zip	28 <b>P.O. BOX 440067</b>		
24 Country	29 City & State <b>MIAMI, FL 33144-0067</b>		
25	30		

3. Date Incorporated or Qualified <b>10/03/1989</b>	
4. FEI Number <b>65-0203081</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>LUIS HERNANDEZ 943 SW 87 AVE MIAMI FL 33174</b>		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		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	SD	1.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MARTINEZ, MARLENE	1.2 NAME					
STREET ADDRESS	5500 W 21 CT, #107	1.3 STREET ADDRESS					
CITY-ST-ZIP	HIALEAH FL	1.4 CITY-ST-ZIP					
TITLE	TD	2.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BALDUVINA, GAIVEZ	2.2 NAME					
STREET ADDRESS	5560 W 21 CT #313	2.3 STREET ADDRESS					
CITY-ST-ZIP	HIALEAH FL	2.4 CITY-ST-ZIP					
TITLE	PD	3.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NOEL, SANDRA J	3.2 NAME					
STREET ADDRESS	5500 WEST 21 CT., #303	3.3 STREET ADDRESS					
CITY-ST-ZIP	HIALEAH FL	3.4 CITY-ST-ZIP					
TITLE		4.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		4.2 NAME					
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
TITLE		5.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP					
TITLE		6.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY-ST-ZIP		6.4 CITY-ST-ZIP					

14. I 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: *Sandra J. Noel* 2-7-98 266-8088

CP25037 (1097)