FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N44475

(4)

Mailing Address

KENDALL FOREST BUSINESS PARK CONDOMINIUM ASSOCIATION, INC.

3000 S.W. 120TH ST. Jiami Fl 33186		13000 S.W. 120TH ST. MIAMI FL 33186-4526					
					3. Date Incorporated or Qualified 07/25/1991	3a. Date of La 04/24/	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 65-0319937		Applied For Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.			00 00 10001	- \$8	75 Additional
2		27			5. Certificate of Status Desired		e Required
City & State		City & State			6. Election Campaign Financing	\$5.	.00 May Be
23		28			Trust Fund Contribution		ded to Fees
Zip	Country	Zip	Cou	untry	8. This corporation has liability for		der s. 199.032,
.4	[25]	29	30	•		Yes No	
	9. Name and Address of Current	Registered Agent		B1 Name	10. Name and Address of New Re	gistered Agent	
				81 Name			
	IVANKA M.		82 Street Ade		dress (P.O. Box Number is Not Acceptable)		
	W 120TH STREET		63				
MIAMI FL	. 33186			63			
				84 City		FL 85	Zip Code
11 Purcuant t	to the provisions of Sections 617 0500	2 and 617 1508. Florida Statu	ites the a	hove-named	corporation submits this statement for the p	ournose of changi	ing its registered
office or re	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was	authorize	ed by the corr	poration's board of directors. I hereby accept	ot the appointmen	nt as registered
SIGNATURE _	Signature, typed or printed name of registered ager	(4)	YE. D. Side	ad Annah alamah ar	required when reinstating)	DATE	*****
12.	Signature, typed or printed name or registered ager OFFICERS AND		13.	acı Ağenit Biğilatüre	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TITLE	D	DELETE	1.1 T	ITLE		Cha	
NAME	FROYO, ANTONIO		1.2 N	IAME			
STREET ADDRESS	13000 S.W. 120TH ST.		1.3 \$	TREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 0	OTY-ST-ZIP			
TITLE	D	DELETE	2.1 3	ĭĭL€		☐ Cha	ange Addition
NAME	Perrin, arthur		2.2 N	iame			
STREET ADDRESS	13000 S.W. 120TH ST.		2.3 \$	TREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		2.41	CITY-ST-ZIP			
TITLE	D	☐ DELETE	31 T	ITLE		L Cha	ange Addition
NAME	PERRIN, ROSE		3.2 N	IAME.			
STREET ADDRESS	13000 S.W. 120TH ST.		3.3 \$	TREET ADDRESS			
CITY-S1-ZIP	MIAMI FL	□ pcrexe		CITY-ST-ZIP		1100	an I I deleta
TITLE	D	☐ DELETE	4.1.1			Cha	ange
NAME	FROYO, IVANKA			NAME			
STREET ADDRESS	13000 S W 120 STREET			STREET ADDRESS			
CITY - ST - ZIP	MIAMI FL	DELETE	5.1 T	OTY-ST-ZIP		☐ Cha	ange Addition
NAME		beter	and the second	IAME			mga La raoman
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		DELETE		TITLE		☐ Cha	ange Addition
NAME				IAME			- —
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
14. I do hereb	by certify that the information supplied	with this filing does not qua	lify for the	exemption s	tated in Section 119.07(3)(i), Florida Statute	s. I further certify	that the
I am an ol	n indicated on this annual report or s fficer or director of the corporation or n Block 12 or Block 13 if changed, or	the receiver or trustee empo	ot berew	accurate and execute this	I that my signature shall have the same legi report as required by Chapter 617, Florida S	ai effect as if mad Statutes; and that	e under oath; that my name