1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N9400002197

KENDALL FOREST BUSINESS PARK II CONDOMINIUM ASSO CIATION, INC.

Princip	oal F	Place o	f Busines
13000	QW/	120TH	ST.

MIAMI FL 33186

Mailing Address

13000 SW 120TH ST MIAMI FL 33186

## **FILED** Mar 16, 1999 8:00 am § Secretary of State

03-16-1999 90153 048 \*\*\*\*70.00



2. Principal Pl	Place of Business 2a. Mailing Address							3		Incorporated	or Qualifed	i , -		
21			26	· ·					04/2	29/1994				
Suite, Apt.	#, etc.		<u> </u>	Suite, Apt. #, etc.				4	FEIN					Applied For
22	•		27						<sup>∶</sup> 65-0	)5783 <u>50</u>			1	Not Applicable
City & State	<del>)</del>			City & State					Certif	fcate of Status	Desired ·	$\mathbf{A}$	<b>7</b>	Additional
23											·			Required
Zip	-	Country	<u> </u>	Zip		ountry		- 6		ion Campaign	_			May Be
24		25 29 30				-	Trust Fund Contribution Added to Fees  10. Name and Address of New Registered Agent							
Name and Address of Current Registered Agent							Name		u. Nam	e and Addres	S OI NEW	Kediateleo	Again	
						81	Name							
FROYO, IV						82	Street	Address	(P.O. B	ox Number is	Not Accept	table)	· . ·	•
13000 SW						83						<del>-</del>		
	. 120TH S1	TREET				33					٠.			
MIAMI FL	33186					84	City		7			FI	85 Zij	p Code
				17 1500 Et : 1 Ot 1	- Ab-					uita thia staton	nont for the		f changing i	its registered
office or re	egistered age	ent, or both, in the S	State of Florid	17.1508, Florida Statu a. Such change was a	autnonz	ea by	tne corp	oration's	on subr	f directors. I h	ereby acce	opt the appo	intment as	registered
agent. I ai	n familiar wit	h, and accept the o	obligations of,	Section 617.0503, Flo	orida St	atutes	•						·	
SIGNATURE					<u> </u>	- 4 4	!	required whe	!			DATE	•	
12.	Signature, typed	or printed name of register	ed agent and title it S AND DIRE		E: Register		it signature	required wile		IONS/CHANG	SES TO O		ND DIRECT	TORS IN 12
TITLE	<u>D</u>	, OFFICER	3 AND DINE	☐ DELETE	_	TITLE		1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10110,0111111			Change	
NAME	FROYO, A	NTONIO			•	NAME								
STREET ADDRESS	13000 SW						FADDRESS				-		<b>.</b>	
	MIAMI FL				1	CITY-S					,			
CITY-ST-ZIP TITLE	D	00100		☐ DELETE	_	TITLE		†					Change	e Addition
NAME	PERRIN, A	RTHUR			2.2	NAME							•	
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NAME	PERRIN, R	OSF			3.2	NAME								- *
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TITLE				☐ DELETE	4.1	TITLE		Direct	tor				☐ Chang	e 🙀 Addition
NAME					4.2	2 NAME		Froyo	. Iva	nka				
STREET ADDRESS					4.3	STREE	T ADDRESS			120th ST		•	*	
CITY-ST-ZIP					4.4	CITY-S	T-ZIP	Miami	FL	33186				
TITLE				☐ DELETE	5.1	TITLE						,	. 🔲 Chang	e 🔲 Addition
NAME					5.2	NAME				•				
STREET ADDRESS					5.3	STREE	T ADDRESS							
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TITLE				☐ DELETE	6.1	πηξ							Chang	e 🗌 Addition
NAME					6.2	NAME							•	ļ
STREET ADDRESS					6.3	STREE	T ADDRESS	i						

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 attactment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP