

FILE NOW: FILING FEE IS \$61.25

FILED

Jun 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000003220 (8)
1. Corporation Name
SANDS POINTE OCEAN BEACH RESORT CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 3211 PONCE DE LEON BOULEVARD #301 CORAL GABLES FL 33134	Mailing Address 3211 PONCE DE LEON BOULEVARD #301 CORAL GABLES FL 33134-7274
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3. Date Incorporated or Qualified 06/17/1996	3a. Date of Last Report
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2. Principal Place of Business 21 16711 Collins Avenue Suite, Apt. #, etc. 22 Suite 101 City & State 23 Miami Beach FL Zip 24 33160	2a. Mailing Address 26 16711 Collins Ave Suite, Apt. #, etc. 27 Suite 101 City & State 28 Miami Beach FL Zip 29 33160 Country 30 Dade
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4. FEI Number 65-0425446	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**MILTON JOSEPH
3211 PONCE DE LEON BOULEVARD #301
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

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]* **President** DATE **4/16/97**

12. OFFICERS AND DIRECTORS

TITLE	PD <input type="checkbox"/> DELETE
NAME	MILTON, JOSEPH
STREET ADDRESS	3211 PONCE DE LEON BOULEVARD #301
CITY-ST-ZIP	CORAL GABLES FL 33134
TITLE	VD <input checked="" type="checkbox"/> DELETE
NAME	LEVANTHAL IRVING
STREET ADDRESS	3211 PONCE DE LEON BOULEVARD #301
CITY-ST-ZIP	CORAL GABLES FL 33134
TITLE	STD <input type="checkbox"/> DELETE
NAME	MILTON, CECIL <i>Secretary</i>
STREET ADDRESS	3211 PONCE DE LEON BOULEVARD #301
CITY-ST-ZIP	CORAL GABLES FL 33134
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Dvon Shielia
2.3 STREET ADDRESS	16711 Collins Avenue
2.4 CITY-ST-ZIP	Suite 101 Miami Beach, FL 33160
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

CR2E037 (9/96)