

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 23 PM 3:29

DOCUMENT # **726103** (5)

1. Corporation Name

ROYAL PALMETTO CONDOMINIUM, INC.

Principal Place of Business

6095 W. 19TH AVENUE
HIALEAH FL 33012

Mailing Address

6095 W. 19TH AVENUE
HIALEAH FL 33012

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **04/12/1973** 3a. Date of Last Report **03/28/1994**

4. FEI Number **59-1576976** Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75** Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

ORLANDO CORREDOR
6095 W. 19TH AVENUE, APT. 200
HIALEAH FL 33012

10. Name and Address of New Registered Agent

81 Name **CARIDAD O'FARRILL**
82 Street Address (P.O. Box Number is Not Acceptable)
83 **6095 W 19 Ave # 210**
84 City **Hialeah** FL 85 Zip Code **33012**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

[Signature] - **CARIDAD O'FARRILL (ST)**

2/15/95

Signature (Typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when registering)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P**
NAME **RIPPES, ALFREDO**
STREET ADDRESS **6095 WEST 19TH AVE., APT. 216**
CITY - ST - ZIP **HIALEAH FL 33012**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **VP**
NAME **HERNANDEZ, HERMINA**
STREET ADDRESS **6095 WEST 19TH AVE., APT. 215**
CITY - ST - ZIP **HIALEAH FL 33012**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **ST**
NAME **O'FARRILL, CORREDOR**
STREET ADDRESS **6095 WEST 19TH AVE., APT. 210**
CITY - ST - ZIP **HIALEAH FL 33012**

3.1 TITLE Change Addition
3.2 NAME **O'FARRILL CARIDAD**
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **D**
NAME **GARCIA, LUIS**
STREET ADDRESS **6095 WEST 19TH AVE., APT. 403**
CITY - ST - ZIP **HIALEAH FL 33012**

4.1 TITLE Change Addition
4.2 NAME **Castro, Ana**
4.3 STREET ADDRESS **6095 W 19 Ave # 310**
4.4 CITY - ST - ZIP **Hialeah, FL. 33012**

TITLE **D**
NAME **FIRPO, MIRIAM**
STREET ADDRESS **6095 WEST 19TH AVE., APT. 405**
CITY - ST - ZIP **HIALEAH FL 33012**

5.1 TITLE Change Addition
5.2 NAME **Leon, Alba**
5.3 STREET ADDRESS **6095 W 19 Ave # 301**
5.4 CITY - ST - ZIP **Hialeah, FL. 33012**

TITLE **D**
NAME **GIL, LUZ**
STREET ADDRESS **6095 WEST 19TH AVE., APT. 207**
CITY - ST - ZIP **HIALEAH FL 33012**

6.1 TITLE Change Addition
6.2 NAME **MORALES, PEDRO**
6.3 STREET ADDRESS **6095 W 19 Ave # 217**
6.4 CITY - ST - ZIP **Hialeah, FL. 33012**

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 110.07(3)(b), 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 the 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] - **CARIDAD O'FARRILL**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/95

(305) 556-4022

**ROYAL PALMETTO CONDOMINIUM INC.
6095 WEST 19 AVE.
HALEAH FL. 33012**

NEW BOARD OF DIRECTORS

JANUARY 25, 1995

IN THE GENERAL MEETING HELD ON JANUARY 25, 1995 WAS ELECCTED
THE NEW BOARD OF DIRECTORS, OF ROYAL PALMETTO CONDOMINIUM
ASSOCIATION.

THE FOLLOWING IS A LIST OF THE MEMBERS OF THE BOARD OF DIRECTORS.

TITLE	OWNER	APT. #
PRESIDENT	ALFREDO RIPPES	216
VICE PRESIDENT	IRMINA HERNANDEZ	215
SEC. TREASURER	CARIDAD O'FERRILL	210
DIRECTOR	MIRYAN FIRPO	405
DIRECTOR	ANA CASTRO	310
DIRECTOR	PEDRO MORALES DELGADO	217
DIRECTOR	ALABA LEON	301

THE BEING NO MORE BUSINESS, THE MEETING WAS ADJOURNED
AT 9:00 O'CLOCK IN THE EVENING.



CARIDAD O'FARRILL
SECRETARY



ALFREDO RIPPES
PRESIDENT