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

APPROVED AND FILED

95 MAY -1 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **752144** **(6)**

1. Corporation Name

GROVE PARADISE CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
~~3206 W TRADE AVE~~ ~~MIAMI FL 33133~~ 3234 W TRADE AVE MIAMI, FL 33133	~~3206 W TRADE AVE~~ ~~MIAMI FL 33133~~ 3234 W. TRADE AVE MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/23/1980	3a. Date of Last Report: 04/12/1994
4. FEI Number: 59-2165081	☐ Applied For ☐ Not Applicable
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	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

9. Name and Address of Current Registered Agent

SKRLD, INC
201 ALHAMBRA CIR
STE 1102
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name: CARLOS AGUILAR
82 Street Address (P.O. Box Numbers Not Acceptable): 3234 W TRADE AVE
83
84 City: MIAMI FL 85 Zip Code: 33133

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: Carlos Aguilar (Signature of Current Registered Agent or Other Signature) (If Changing Registered Agent or Registered Office Address) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
TITLE	P	11 TITLE	P ☒ Change ☐ Addition
NAME	ZUCHETTI, PATRICIA	12 NAME	CARLOS AGUILAR
STREET ADDRESS	3216 W TRADE AVE	13 STREET ADDRESS	3234 W TRADE AVENUE
CITY ST ZIP	MIAMI FL	14 CITY ST ZIP	MIAMI FL 33133
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	KOSTRZEWSKI, WILLIAM J	22 NAME	
STREET ADDRESS	3204 W TRADE AVE	23 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	24 CITY ST ZIP	
TITLE	PD	31 TITLE	☐ Change ☐ Addition
NAME	HAMELBURG, JUDI	32 NAME	
STREET ADDRESS	3206 W TRADE AVE	33 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	34 CITY ST ZIP	
TITLE	SD	41 TITLE	☒ Change ☐ Addition
NAME	TERENZIO, GEORGE	42 NAME	PATRICIA ARIAS
STREET ADDRESS	930 FALCON AVE	43 STREET ADDRESS	3229 W. TRADE AVE
CITY ST ZIP	MIAMI SPRINGS FL	44 CITY ST ZIP	MIAMI FL 33133
TITLE	TD	51 TITLE	☐ Change ☐ Addition
NAME	AICHNER, DONALD	52 NAME	
STREET ADDRESS	3240 W TRADE AVE	53 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	54 CITY ST ZIP	
TITLE		61 TITLE	MARIO GONZALEZ ☐ Change ☒ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	3222 W TRADE AVE.
CITY ST ZIP		64 CITY ST ZIP	MIAMI FL 33133

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: Carlos Aguilar
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Corporate Name)

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