FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



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

1	9	9	6

DOCUMENT #

1. Corporation Name

(4)

ΡI	A7A	DFI	PRADO	CONDOMINIUM	ASSOCIATION.	INC.
	$n_{L}n$		IIIAUU		AUUUUUIA I IURI	1110

,								
Principal Place of Business Mailing Address					ANI BIBIL BIBIL BIBIF BII			
18071 BISCAYNE BOULEVARD 18071 BISCAYNE BOULEVARD N MIAMI BEACH FL 33160 N MIAMI BEACH FL 33160								
ļ						3. Date Incorporated or Qualified 12/28/1970	3a. Date of La: 05/01/	st Report 1995
2. Principal Pla 21	ace of Business	2a. Mailing Address 26				4. FEI Number 59-1349416		Applied For Not Applicable
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.	_			5. Certificate of Status Desired	1 1 7 - 1	75 Additional a Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	1 1	00 May Be led to Fees
Zip 24	Country 25	Zip 29	Counti 30	79 8. This corporation has liability for intangible tax under s. 199.03 Florida Statutes			s. 199.032,	
	9. Name and Address of Curren		<u> </u>			10. Name and Address of New Re		
			8	1	Name			
HYMAN, 44 Flag	MICHAEL L Ler st		8:	2	Street Addre	ess (P.O. Box Number is Not Acceptable)	
14TH FL	DOR COURTHOUSE TOWER		8:	3				
MIAMI FL	. 33160		8-	4	City		F1 85	Zip Code
11. Pursuant t	o the provisions of Sections 617.0502	and 617.1508, Florida Statutes	the above	-na	med corpora	ation submits this statement for the purpo d of directors. I hereby accept the appoi	ose of changing its	registered office
familiar wit	h, and accept the obligations of Secti	on 617.0503, Florida Statutes.	Dy the CO	por	alion's board	d or directors. Thereby accept the appoin	Killionit as registere	o agent. Fam
SIGNATURE (Signature, typed or printed name of registered agent	and title if anylicable (NOTE	Registered An	ent s	sonature reculred	when reinstaling) 4 25/76	DATE	
12.	OFFICERS AND		13.	,0.1.0	Pg. atore required	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE	Р	DELETE	1.1 TITLE	:	T		☐ Change	Addition
NAME	FRLAN, ANTE		1.2 NAMI	E				
STREET ADDRESS	18081 BISCAYNE BLVD		1.3 STRE	ET AI	DDRESS			
CITY-ST-ZIP	N. MIAMI BEACH FL VP	4EJDE: EXC	1.4 CITY	<u> </u>			€ Chana	Addition
TITLE	GRANT, HOWARD	K] DELETE	2.1 TITLE		VP	vin Miot	🔽 Change	: Addition
NAME CAREET ADDRESS	18051 BISCAYNE BLVD		2.2 NAMI				#1000	
STREET ADDRESS	N. MIAMI BEACH FL		2.3 STRE			071 Biscayne Blvd.		
CITY-ST-ZIP	T	Y ∏DELETE	2. 4 CITY 3.1 TITLE		-ZIP N. T	Miami Beach, Fla.	. 33160 Change	Addition
NAME	WILDER, HOWARD	A	3.2 NAMI			hal Tachena		*
STREET ADDRESS	18081 BISCAYNE BLVD		3.3 STRE	ET AL		thel Ingberg	4200	
CITY-ST-ZIP	N. MIAMI BEACH FL		3.4. CITY	r-\$T-	- ZIP N	3021 Biscayne Blyd . <mark>Miami Beach, Fla</mark>	1. #3UZ 33160	
TITLE	\$	X DELETE	4.1 TITLE		s.		☐ Chang-	Addition
NAME	SEIDLER, ROSALIND		4. 2 NAV	1E	I	arah Myers		
STREET ADDRESS	18011 BISCAYNE BLVD		4.3 STRE	ET AL			l. #1701	
CITY-ST-ZIP	N. MIAMI BEACH FL		4.4 CITY		ZIP N	3011 Biscayne Blyd Miami Beach, Fla	33160	
TITLE	d Arnold, terri	DELETE	5.1 TITLE				[_] Chang-	Addition
NAME OVEREZ ADDRESS	18041 BISCAYNE BLVD		5.2 NAM		nnocce .			
STREET ADDRESS CITY-ST-ZIP	N MIAMI BEACH FL		5.3 STRE 5.4 CITY					
TITLE	D DAOTTE	DELETE	5.4 CHY 6.1 TITLE		- 11		☐ Chang-	: Addition
NAME	MIOT, ALVIN		6.2 NAM				_ •	
STREET ADDRESS	18071 BISCAYNE BLVD		6.3 STRE	ET AL	DDRESS			
CITY - ST - ZIP	N. MIAMI BEACH FL		6.4 CITY					
14. I do hereb certify that	y certify that the information supplied with the information indicated on this annu-	vith this filing is voluntarily furnis	hed and do	xes i	not qualify for	or the exemption stated in Section 119.0 te and that my signature shall have the s	7(3)(k), Florida Stat ame legal effect as	lutes. I further if made under
1	I am an officer or director of the corpo Block 12 or Block 13 if changed, or c	and the second and a second accordance to		d to	execute this	s report as required by Chapter 617, Flor	ida Statutes; and t	that my name

SIGNATURE: SIGNATURE AND TYPED OR PRINTED, NAME OF BIGNING OFFICER OR DIRECTOR