

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 720318 (5)

1. Corporation Name

PORT ROYALE CONDOMINIUM, INC.



Principal Place of Business

Mailing Address

6969 COLLINS AVE.
MIAMI BEACH FL 33141

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MIAMI BEACH FL 33141

3. Date Incorporated or Qualified
02/23/1971

3a. Date of Last Report
09/25/1995

4. FEI Number
59-1449993

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

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 6969 Collins Ave.

26 6969 Collins Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 M.

27 M.

City & State

28 Miami Beach FL

Zip

Country

24 33141

25 USA

Zip

Country

29 33141

30

9. Name and Address of Current Registered Agent

PEDRO, CRESPI A
6969 COLLINS AVE 1104
MIAMI BEACH FL 33141

10. Name and Address of New Registered Agent

81 Name

NONE

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVA ☐ DELETE

NAME CRESPI, PEDRO A
STREET ADDRESS 6969 COLLINS AVE.
CITY-ST-ZIP MIAMI BEACH FL

TITLE VD ☐ DELETE

NAME DEL AMO, JUAN G
STREET ADDRESS 6969 COLLINS AVE.
CITY-ST-ZIP MIAMI BEACH FL

TITLE SVA ☐ DELETE

NAME RODRIGUEZ, ARMANDO
STREET ADDRESS 6969 COLLINS AVE.
CITY-ST-ZIP MIAMI BEACH FL

TITLE TVD ☐ DELETE

NAME SANTIAGO, PALACIOS
STREET ADDRESS 6969 COLLINS AVE
CITY-ST-ZIP MIAMI BEACH FL

TITLE DA ☐ DELETE

NAME DINGENTHAL, RUTH
STREET ADDRESS 6969 COLLINS AVENUE
CITY-ST-ZIP MIAMI BEACH FL

TITLE DA ☐ DELETE

NAME RODRIGUEZ, FELIX
STREET ADDRESS 6969 COLLINS AVE.
CITY-ST-ZIP MIAMI BCH. FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

Pedro A. Crespi, President 8-8-96

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0007365

CR2E037 (3/96)