FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

765043

(5)

BIRDGROVE TOWNHOUSES CONDOMINIUM, INC.

	-				İ				
Principal Place of Business Mailing Address						I I ddiii ibair diad tikh adiii dibdd i		IAM DIAM BIDIN D	JANI BIBN (BB)
	VELOPMENT AND INVESTMENT CORP. AY. SIXTH FLOOR 5	% CAPITAL DEVELOPMENT AND INVESTMENT CORP. 2150 CORAL WAY. SIXTH FLOOR MIAMI FL 33145-2629				122			
						3. Date Incorporated or Qualified 10/12/1982	3a. L	Date of Last F 03/29/19	
	lace of Business	2a. Mailing Address				T SE-VEVAGEN FILE			pplied For
21 Subs Am H at a		26				0070004004			ot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State		City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip Country		ry		8. This corporation has liability for in			3. 199.032,
24	25	29	30] Yes	_	
	9. Name and Address of Current	Registered Agent	8.	4 Nome		10. Name and Address of New Reg	gistered	Agent	
AMERICA A			٥	1 Name	;				
	gary v esq. / 7th street		82	2 Street	t Address	(P.O. Box Number is Not Acceptable	le)		
MIAM! FL			83	3					
			84	4 City			E1	85 Zip	Code
11. Pursuant t	to the provisions of Sections 617,0502	and 617 1508 Florida Statu	ites the abo	Ve-namer	d cornoral	tion submits this statement for the n	FL	=	t- registered
office or re agent. I ar	to the provisions of Sections 617.0502 egistered agent, or both, in the State or familiar with, and accept the obligati	f Florida. Such change was ions of, Section 617.0503, F	authorized to lorida Statut	by the cores.	rporation's	s board of directors. I hereby accep	t the app	pointment as	registered
SIGNATURE _									
Signature, typed or printed name of registered agent and title if applicable (NOTE R 12. OFFICERS AND DIRECTORS				gent signatur	re required wh	hen reinstating)	DATE	5 DIDECTOR	25.01.40
TITLE	PD OFFICERS AND	DELETE	13. 1.1 TITLE		T	ADDITIONS/CHANGES TO OFFICE	EHS ANI	D DIRECTOR Change	AS IN 12
NAME	LOURDES, LORENZO-LUACES		1.2 NAME					☐ Change	L. Audilion
STREET ADDRESS	% 2150 CORAL WAY, 6TH FLO	IOB		T ADDRESS					
CITY-ST-ZIP	MIAMI FL 33145	QII.	1.4 CITY -						
TITLE	D	DELETE	2.1 TITLE		 			Change	Addition
NAME	LOVIO, HECTOR		2.2 NAME					_ ···.,	
STREET ADDRESS	% 2150 CORAL WAY, 6TH FLO		T ADDRESS						
CITY-ST-ZIP	MIAMI FL 33145		2. 4 CITY-						
TITLE	D	☐ DELETE	3.1 TITLE		1			Change	Addition
NAME	DUARTE, PETER		3.2 NAME						
STREET ADDRESS	% 2150 CORAL WAY, 6TH FLO	OR .	3.3 STREE	T ADDRESS					
CITY-ST-ZIP	MIAMI FL 33145		3.4 CITY-	\$1-ZIP	<u> </u>				
TITLE	\$	DELETE	4.1 TITLE		T			Change	Addition
NAME	PINIELLA, TANIA		4. 2 NAME	i					
STREET ADDRESS	C/O 2150 CORAL WAY, 6TH FL	_00R	4.3 STREE	T ADDRESS					
CITY-ST-ZIP	MIAMI FL	Dotter	4.4 CITY -	ST-ZIP	ļ				
TITLE		L_J DELETE	5.1 TITLE		ł			☐ Change	☐ Addition
NAME			5.2 NAME						
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP		DELETE	5.4 CITY-1	ST-ZIP	 				- La Malbara
TITLE		LJ VELETE	6.1 TITLE					L Change	Addition
NAME PTOCET ADDRESS			6.2 NAME						
STREET ADDRESS	•			T ADDRESS					
CITY-ST-ZIP			6.4 CITY -	ST-ZIP					

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 chapted, or on an altachment with an address.

FILED

Mar 17 1997 8:00am

Secretary of State

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