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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N94000003132			
1. Corporation Name NORTH TOWER AT THE POINT CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 20803 BISCAYNE BLVD SUITE 103 AVENTURA FL 33180		Mailing Address 20803 BISCAYNE BLVD SUITE 103 AVENTURA FL 33180	



2. Principal Place of Business 21 21205 Yacht Club Drive Suite, Apt. #, etc. 22 City & State 23 Aventura FL Zip Country 24 33180 25 USA		2a. Mailing Address 26 c/o Glen Management Services Suite, Apt. #, etc. 27 4301 Oak Circle, #23 City & State 28 Boca Raton FL Zip Country 29 33431 30 USA		3. Date Incorporated or Qualified 06/24/1994	
		4. FEI Number 65-0665268		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	

9. Name and Address of Current Registered Agent WOLFE, LEON J 100 SE SECOND ST 35TH FLOOR, INTERNATIONAL PLACE MIAMI FL 33131				10. Name and Address of New Registered Agent 81 Name Andrew C. Glen 82 Street Address (P.O. Box Number is Not Acceptable) Glen Management Services 83 4301 Oak Circle, Suite 23 84 City Boca Raton FL 85 Zip Code 33431			
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 A. GLEN DATE 3/15/99							

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE DP NAME EPSTEIN, MORTON A President STREET ADDRESS 21205 YACHT CLUB DR, #1402 CITY-ST-ZIP AVENTURA FL 33180				1.1 TITLE DP 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			
TITLE DVST NAME ACKERMAN, ROBERT C STREET ADDRESS 20803 BISCAYNE BLVD SUITE 103 CITY-ST-ZIP AVENTURA FL 33180				2.1 TITLE Fredric Blank V.P./Sec. Treasurer 2.2 NAME 21205 NE 37 AVE Apt 1704 2.3 STREET ADDRESS Aventura FL 33180 2.4 CITY-ST-ZIP			
TITLE DP NAME TACHER, ROBERTA STREET ADDRESS 20803 BISCAYNE BLVD SUITE 103 CITY-ST-ZIP AVENTURA FL				3.1 TITLE Joe VAZQUEZ 3.2 NAME 21205 NE 37 AVE Apt 1905 3.3 STREET ADDRESS Aventura FL 33180 3.4 CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP			

14. I 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIG Fredric Blank REQUIRED 3/1/99 305 932-6259
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/198)