FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # 703262**

1. Corporation Name

625 ESPANOLA WAY INC A CONDOMINIUM

Principal Place of Busines	5
641 ESPANOLA WAY. #37 ATTN: GEORGE JEREZ MIAMI BEACH FL 33139 US	

Mailing Address

641 ESPANOLA WAY, #37 ATTN: GEORGE JEREZ MIAMI BEACH FL 33139



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Apr 21, 1999 8:00 am §
Secretary of State

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US	112 33133	US				-		
	Place of Business	2a. Mailing Address	 		3. Date Incorporated or Qualifed 11/27/1961			
21 Suite Ant	# oto	Suite, Apt. #, etc			4. FEI Number		. An	plied For.
	.#, etc			<u> </u>	59-1038865			t Applicable
22 . 27 City & State City & State					\$8.75 Additional			
City & State City & State					5. Certifcate of Status Desired		Fee Re	
Zip Country Zip			Country		6. Election Campaign Financing		\$5.00	May Re
					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
24	9. Name and Address of Curre		101		10. Name and Address of New	Registered A		
	3. Name and Address of Curren	it regionaled Agont	81	Name		<u> </u>		
			82					
	JEREZ, GEORGE 641 ESPANOLA WAY				fress (P.O. Box Number is Not Accept	able)	•	
APT 37	MOLA WAT	•	83					
MIAMI BEACH FL 33139			84	City			85 Zip	Code
1	•					FL		
l office or	t to the provisions of Sections 617.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was aut	Inonzed by	the corporati	poration submits this statement for the ion's board of directors. I hereby acce	purpose of o pt the appoin	nanging its tment as re	registered gistered
SIGNATURE						DATE		
42	Signature, typed or printed name of registered age	Int and title if applicable. (NOTE: H	13.	nt signature require	ad when reinstating) ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12
12.	D.	DELETE	1.1 TITLE		7,5011101011110101101		Change	Addition
TITLE		- Detere					_ ,	
NAME	JEREZ, GEORGE		1.2 NAME	·				
STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •		1.3 STREET		•			
CITY-ST-ZIP	MIAMI BEACH FL 33139	ET ACLETE	1.4 CITY-S	T- ZIP			Change	Addition
TITLE	D	☐ DELETE	2.1 TITLE					
NAME	CERNUDA, JUAN		2.2 NAME		•			
STREET ADDRESS			23 STREE	TADORESS 💳	<u> سينات تونين شيخ تنين نين تنين</u>			
CITY-ST-ZIP	MIAMI BEACH FL 33139		2.4 CITY-5	ST-ZIP				
TITLE	D	☐ DELETE	3.1 TITLE	•	-		Change	☐ Addition
NAME	MARTIN, CLAIRE	•	3.2 NAME			چ - حق		
STREET ADDRESS	s 641 ESPANOLA WAY, #24		3.3 STREE	TADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33139		3.4. CITY-S	ST-ZIP		· · · ·		Addition
TITLE	D :	☐ DELETE	4.1 TITLE				☐ Change	Addition
NAME	ORMAS, ANGEL		4. 2 NAME					
STREET ADDRESS	s 641 ESPANOLA WAY, #8		4.3 STREE	T ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33139		4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			<u>-</u>	☐ Change	
NAME			5.2 NAME					
STREET ADDRESS	si ·		5.3 STREET	TADDRESS				•
OUTV OT 310	1		5.4 CITY-S	T-ZIP			•	

CITY-ST-ZIP 14. I hereby certify that the information supplied with this light 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 supplied ental 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 of 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

Addition

Change