TILE MUNICIPALITY OF THE APTEK MAT TO LID GOOD BU

NON -PROFIT CORPORATION ANNUAL REPORT 1999



Alton Star Condominium Association, Inc.

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # i. Corporation Name

FILED May 13, 1999 8:00 am Secretary of State 05-13-1999 90041 044 ****61.25

rcipal Place of Business	Mailing Address					
1236 Alton Rd.	c/o Regatta REM					
Miami Beach, Florida	628 Sixth Street		DO NOT WRITE IN THIS SPACE			
33139	Miami Beach, Fl.	33139	3. Date Incorporated or Qualifed			
Principal Place of Business	2a. Mailing Address 26 D Kinatta R	EM	4. FEI Number 59-2487978	Applied For Not Applicable		
Suite, Apt. #, etc.	Suite, Apt #Jetc. 27 6 28 6 5 5 7	est	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State 28 Miami Beau	ch, FL.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 25	Zip Cool 29 3 3/39 30	USA	This corporation owes the current year Personal Property Tax.	ar Intangible ☐ Yes ☐ No		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
DIAZ, LUCYECIA	e.	81 Name	egatta Real Est	ake Mat.		
1236 Alton Road		1058	O S Acceptable))		
		othy Voda				
mB, FC.33	i 39	84 City 10	mi Beach	FL 85 Zp Codo 15-		

Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

e-wallikië	Signature, typed or printed name of registered agent and title if applicable		rustered Agent signature i	<u> </u>	DATE.		
	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGE		ID DIRECTO	
	DP	ELETE	1.1 TITLE	Alfredo Mendo		nange	• ddition
-	MORENO, HUGO A		1.2 NAME	Altredo Meno	ζ <u>ζ</u>	•	·
I AUDRESS	6900 E. Ben Drive 1175		1.3 STREET ADDRESS	1236 Alton	(5) (1)		
ST-ZIP	MORENO, HUGO A 6900 E. Bey Drive 1175 M. B. FL. 3341		1.4 CITY-ST-ZIP	Miami Beach	, Fl. 33/3	9	
	VD .	☐ DELETE	2.1 TITLE			Change	Addition
	RAMOS, Jairo		2.2 NAME				
··· FADDRESS	1236 AItON Rd #304		2.3 STREET ADDRESS				
·-ST-ZIP	MIAMI BEACH, FC.	9	2. 4 CiTY-ST-ZiP				
		DELETE	3.1 TITLE			Change	Addition
	ST DIAZ, LUCRECIA R 1236. A I ton RO# 303 MIAMI BEACH, FL 33139		3.2 NAME				
n (3 а сиякц56	1236 A1+00 RD# 303		33 STREET ADDRESS				
v-ST-ZIP	MIAMI BEACH, FL. 33139		34. CITY-\$T-ZIP				
		☐ DELETE	4 1 TITLE	TRUSTEE		[_] Change	Addition
			4. 2 NAME	TIMOTHY V	QDD		
· · I ADORESS			4.3 STREET ADDRESS	120 /2004	5		
ST-ZIP			4.4 CITY-ST-ZIP	628 GTH !	$\sum_{i} w_i w_i$, BCH	FUA
-		☐ DELETE	5.1 TITLE		33139	☐ Change	Addition
-			5.2 NAME		-		
* 1 AINNU 125			5.3 STREET ADDRESS				
ST-ZIP			5.4 CITY-ST-ZIP				
		☐ DELETE	6.1 TITLE			Change	☐ Addition
-			6.2 NAME				
I ADDRESS			63 STREET ADDRESS				
ST-ZIP			6.4 CITY-ST-ZIP				i

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 recoiver or trustee empowered to execute this report as required by Chapter 607, 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.