NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 16, 1999 8:00 am § Secretary of State

04-16-1999 90058 050 ****61.25

			$\overline{}$
DOCUN	JENT :	# 70665	1

1. Corporation Name

ASTOR CONDOMINIUM NO 2 INC

Principal Pla	ace of	Business
---------------	--------	----------

3500 HARRISON STREET

Mailing Address

3500 HARRISON ST #6

APT. #2 HOLLYWOOD I	FL 33021	STE 2 HOLLYWOOD FL 33021 US			(((
_ `	lace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed 01/03/1964		
Suite, Apt.	# PIC	Suite, Apt. #, etc.			4. FEI Number	Ap	plied For
22	, otc.	27			59-6169262		t Applicable
City & State	9	City & State			5. Certificate of Status Desired	\$8.75 A	dditional
23		28		_	5. Certificate of Status Desired	Fee Re	quired
Zip	Country	Zip	Country	'	6. Election Campaign Financing	\$5.00	· · · · · · · · · · · · · · · · · · ·
24	25	29 30	0		Trust Fund Contribution	Added to	o Fees
	9. Name and Address of Current	Registered Agent	04	Nama	10. Name and Address of New Registe	red Agent	
	•		81	Name			
ST. JOHN			82	Street A	ddress (P.O. Box Number is Not Acceptable)		
3500 HAR	rrison St. #2		83	 			
HOLLYWO	OOD FL 33021:		83				
			84	City		FL 85 Zip C	Code
44 6		and 617 1509 Florida Statutos	the about	e-pamed o	amoration submits this statement for the ourno	se of changing its	registered
office or r agent. I a	to the provisions of Sections 617.0502 egistered agent, or both, in the State of Infamiliar with, and accept the obligant	f Florida. Such change was auth ns of Section 617.0503, Florida	norized by a Statutes	the corpor	ration's board of directors. I hereby accept the a	ppointment as rec	gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Re	egistered Age	nt signature rec	guired when reinstating) DAT		l
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 TITLE		Director (D)	Change	Addition
NAME	WESTERFIELD, CHARLES		1.2 NAME	1	many Blater		
STREET ADDRESS	3500 HARRISON ST #11		1.3 STREE	TADDRESS	3521 3.W. 28TM	- 1	
CITY-ST-ZIP	HOLLYWOOD FL	•	1.4 CITY- S	T-ZIP	It Sandulale H 33	13/2	
TITLE	PD	☐ DELETE	2.1 TITLE		Digector (D)	Change	☐ Addition
NAME	MENDEZ, MIQUEL	-	2.2 NAME			• •	ł
STREET ADDRESS	3914 JOHNSON ST.		2.3 STREE	TADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL		2.4 CITY-5	ST-ZIP			
TITLE	SDT	DELETE	3.1 TITLE	- ~	PRESIDENT (PD) Kevin Mingel 9101 Lake Park G. 1 Danie of 33324	Change	Addition
NAME	ST. JOHN, LAURA		3.2 NAME		Kevin Mingel		,
STREET ADDRESS	3500 HARRISON ST. #2		3.3 STREE	TADORESS	9101 Rake Park G.	v.	}
CITY-ST-ZIP	HOLLYWOOD FL 33021	·	3.4. CITY-5	ST-ZIP	Davie Fr 33324		
TITLE	D	☐ DELETE	4.1 TITLE			Change	Addition
NAME	RIZZO, LUCRETIA		4. 2 NAME	}			
STREET ADDRESS	3500 HARRISON ST.#12A		4.3 STREE	T ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33021		4.4 CITY-S	T-ZIP	·	<u>.</u>	
TITLE	D	DELETE	5.1 TTLE)		Change	☐ Addition
NAME	Westerfield, Peg	'\	5.2 NAME				}
STREET ADDRESS	3500 HARRISON ST #11			TADDRESS		•	
CITY-ST-ZIP	HOLLYWOOD FL		5.4 CITY- S	T-ZIP			
TITLE	VD	☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME	QUINONES, ED		6.2 NAME				ļ
STREET ADDRESS	3500 HARRISON ST #8		4	TADDRESS			}
CITY-ST-ZIP	HOLLYWOOD FL		6.4 CITY-5	T-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 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 a attachment with an address, with all other like empowered.

SIGNATURE: