

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

FILED
Apr 24 1997 8:00am
Secretary of State

DOCUMENT # 707017 (0)
1. Corporation Name
BISCAYNE LAKE GARDENS BUILDING "A", CORP., INC.



Principal Place of Business Mailing Address
2800 N.E. 203 STREET 2800 N.E. 203 STREET
MIAMI FL 33180 MIAMI FL 33180-4105

3. Date Incorporated or Qualified 03/20/1964 3a. Date of Last Report 05/01/1996

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-1235863 Applied For Not Applicable

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional Fee Required

22 City & State 27 City & State 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 Zip Country 28 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

SMAGALA, JEAN
2800 NE 203RD ST., #6
MIAMI FL 33180

81 Name SALANT, ETTA
82 Street Address (P.O. Box Number Is Not Acceptable) 2800 N.E. 203 ST. # 14
83
84 City MIAMI FL 85 Zip Code 33180

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 Etta Salant 4-17-97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VD	NAME	FIELEK, STANLEY	1.1 TITLE	P/D	1.2 NAME	FIELEK, STANLEY
STREET ADDRESS	2800 NE 203 ST	1.3 STREET ADDRESS	2800 NE 203 ST	1.4 CITY-ST-ZIP	MIAMI, FL	2.1 TITLE	
CITY-ST-ZIP	MIAMI, FL 00000	2.2 NAME		2.3 STREET ADDRESS		2.4 CITY-ST-ZIP	
TITLE	VD	NAME	HILL, ROLAND	3.1 TITLE	V/D	3.2 NAME	SALANT, ETTA
STREET ADDRESS	2800 NE 203RD STREET	3.3 STREET ADDRESS	2800 NE 203 ST	3.4 CITY-ST-ZIP	MIAMI, FL	4.1 TITLE	
CITY-ST-ZIP	MIAMI FL	4.2 NAME		4.3 STREET ADDRESS		4.4 CITY-ST-ZIP	
TITLE	TD	NAME	SALANT, ETTA	5.1 TITLE	S/D	5.2 NAME	BOOLEY, JEANNE
STREET ADDRESS	2800 NE 203 ST	5.3 STREET ADDRESS	2800 NE 203 ST	5.4 CITY-ST-ZIP	MIAMI, FL 33180	6.1 TITLE	
CITY-ST-ZIP	MIAMI FL	6.2 NAME		6.3 STREET ADDRESS		6.4 CITY-ST-ZIP	
TITLE	D	NAME	LEVINE, MINNE				
STREET ADDRESS	2800 NE 203 ST						
CITY-ST-ZIP	MIAMI FL						
TITLE	PD	NAME	SMAGALA, JEAN				
STREET ADDRESS	2800 NE 203 ST						
CITY-ST-ZIP	MIAMI FL						
TITLE		NAME					
STREET ADDRESS							
CITY-ST-ZIP							

14. 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 changed, or on an attachment with an address.

SIGNATURE: Etta Salant 4-17-97 0033448
Signature and typed or printed name of signing officer or director Date Daytime Phone

CR2E037 (9/96)