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FILED

Apr 30 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710327 (8)

1. Corporation Name

POINT EAST ONE CONDOMINIUM CORPORATION, INC.



Principal Place of Business

Mailing Address

2895 POINT EAST DRIVE
MIAMI FL 331602895 POINT EAST DRIVE
MIAMI FL 33160-2658

3. Date Incorporated or Qualified

02/08/1966

3a. Date of Last Report

02/14/1996

4. FEI Number

59-1281661

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERZ, DONALD
2930 POINT EAST DRIVE E114
MIAMI FL 33160

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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 PD
NAME HERZ, DONALD
STREET ADDRESS 2930 POINT EAST DRIVE E114
CITY-ST-ZIP MIAMI FL☐ DELETE1.1 TITLE Director
1.2 NAME Donald Herz
1.3 STREET ADDRESS 2930 Point East Dr. E114
1.4 CITY-ST-ZIP Aventura, FL. 33160☒ Change ☐ AdditionTITLE VPD
NAME SNEIDER, RYNA
STREET ADDRESS 2980 POINT EAST DR, D-104
CITY-ST-ZIP N MIAMI BCH FL☐ DELETE2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP☐ Change ☐ AdditionTITLE SD
NAME NUNES, LUIS
STREET ADDRESS 2999 POINT E DR, C-201
CITY-ST-ZIP N MIAMI BCH FL☐ DELETE3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP☐ Change ☐ AdditionTITLE TD
NAME MANDIA, MILLIE
STREET ADDRESS 2999 POINT E DR, C-502
CITY-ST-ZIP N MIAMI BCH FL☐ DELETE4.1 TITLE President
4.2 NAME Millie Mandia
4.3 STREET ADDRESS 2999 Point East Dr. C 502
4.4 CITY-ST-ZIP Aventura, FL. 33160☒ Change ☐ AdditionTITLE D
NAME YOUNG, LOU
STREET ADDRESS 2999 POINT EAST DRIVE C214
CITY-ST-ZIP MIAMI FL☒ DELETE5.1 TITLE Treasurer
5.2 NAME Eva Szekely
5.3 STREET ADDRESS 2999 Point East Dr. C-614
5.4 CITY-ST-ZIP Aventura FL. 33160☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETE6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0031505

CR2E037 (9/96)