

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.**  
**AMOUNT DUE ON QR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)**

**NONPROFIT CORPORATION ANNUAL REPORT 1996**



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 710365 (8)**

1. Corporation Name  
**7434 HARDING CONDOMINIUM, INC.**



Principal Place of Business: **7434 HARDING AVENUE MIAMI FL 33141**  
 Mailing Address: **7434 HARDING AVENUE MIAMI FL 33141**

3. Date Incorporated or Qualified: **02/15/1966**  
 3a. Date of Last Report: **04/20/1995**  
 4. FEI Number: **59-2379442**  
 Applied For:  Not Applicable  
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: **7434 HARDING AVENUE MIAMI BEACH FL 33141**  
 2a. Mailing Address: **7434 HARDING AVENUE MIAMI BEACH FL 33141**  
 21. Suite, Apt. #, etc.:  
 22. City & State:  
 23. Zip: **33141** Country:  
 24. Zip: **33141** Country:

9. Name and Address of Current Registered Agent  
**LUNDSTROM, SILVIA  
 7434 HARDING AVE #11  
 MIAMI BEACH FL 33141**

10. Name and Address of New Registered Agent  
 81 Name: **JESUS SANTANA**  
 82 Street Address (P.O. Box Number is Not Acceptable): **7434 HARDING AVE #9**  
 83  
 84 City: **MIAMI BEACH** FL 85 Zip Code: **33141**

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]* (NOTE: Registered Agent signature required when reinstating) DATE: **6-11-96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	
NAME	NANFRA, SYLVIA	1.2 NAME	
STREET ADDRESS	7434 HARDING AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	
NAME	SATANA, JESUS	2.2 NAME	
STREET ADDRESS	7434 HARDING AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	2.4 CITY-ST-ZIP	
TITLE	TS	3.1 TITLE	RAMOS, MAYRA (TS)
NAME	EUNDSTROM, SILVIA	3.2 NAME	7434 Harding Ave. #2
STREET ADDRESS	7434 HARDING AVE	3.3 STREET ADDRESS	Miami Beach, FL 33141
CITY-ST-ZIP	MIAMI BEACH FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	SCHEIN, BELLA	4.2 NAME	
STREET ADDRESS	7434 HARDING AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	000001909840
NAME	MULLIN, FLORENCE	5.2 NAME	-07/31/96--01066--005
STREET ADDRESS	7434 HARDING AVE	5.3 STREET ADDRESS	***8.75
CITY-ST-ZIP	MIAMI BEACH FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	200001909842
NAME	ELLIS, BILL	6.2 NAME	-07/31/96--01066--006
STREET ADDRESS	7434 HARDING AVE	6.3 STREET ADDRESS	***61.25
CITY-ST-ZIP	MIAMI BEACH FL	6.4 CITY-ST-ZIP	

Change  Addition

Change  Addition

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Change  Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **JESUS SANTANA** DATE: **6-11-96** DAYTIME PHONE #: **8681426**

CR2E037 (3/96)