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Jun 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 714823 (2)
1. Corporation Name
ANDOR PLAZA ASSOCIATION, INC.



Principal Place of Business: 16850 SOUTH GLADES DRIVE NORTH MIAMI BEACH FL 33162
Mailing Address: 16850 SOUTH GLADES DRIVE NORTH MIAMI BEACH FL 33162

3. Date Incorporated or Qualified: 06/24/1968
4. FEI Number: 59-1303146
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
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
ROSARIO, PEDRO
16850 SO GLADES DRIVE
N MIAMI FL 33162

10. Name and Address of New Registered Agent
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: *Pedro Rosario* Vice President 4/14/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	
TITLE	P KARPENKOPF, MANUEL 16850 SO GLADES DRIVE NO MIAMI FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE Cook, Freddie 1.2 NAME 16850 So. Glades Drive 1.3 STREET ADDRESS No. Miami, FL 1.4 CITY-ST-ZIP "President"
TITLE	VPD SANTELICES, BERTHA 16850 S GLADES DRIVE N MIAMI FL	<input type="checkbox"/> DELETE	2.1 TITLE "Sec. Dir." 2.2 NAME Jaffe, Eleanor 2.3 STREET ADDRESS 16850 S. Glades Drive 2.4 CITY-ST-ZIP No. Miami, FL "Sec. Dir."
TITLE	DT HILDE, BERGER 16850 SO GLADES DRIVE N. MIAMI BCH FL	<input type="checkbox"/> DELETE	3.1 TITLE "VPD" 3.2 NAME Rosario, Pedro 3.3 STREET ADDRESS 16850 So. Glades Drive 3.4 CITY-ST-ZIP No. Miami, FL VPD
TITLE	SD BRINGUIER, CARLOS 16850 SO GLADES DRIVE N. MIAMI BCH FL	<input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE	D JAFFE, ELEANOR 16850 S GLADES DR N MIAMI BEACH FL	<input checked="" type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE	VPD SANTELICES, BERTHA 16850 S GLADES DR N MIAMI BEACH FL	<input checked="" type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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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 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: *Pedro Rosario* Vice President 4/14/98

CR2037 (10/97)