

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 716152 (4)

1. Corporation Name
910 JEFFERSON TOWERS, INC., A CONDOMINIUM



Principal Place of Business: 910 JEFFERSON AVENUE MIAMI BEACH FL 33139-8453
Mailing Address: 910 JEFFERSON AVENUE MIAMI BEACH FL 33139-8453

3. Date Incorporated or Qualified: 03/04/1969
3a. Date of Last Report: 02/22/1995
4. FEI Number: 59-2040665 NOT APPLICABLE
5. Certificate of Status Desired: Additional FEE Required \$8.75
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
21. Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country
2a. Mailing Address
26. Suite, Apt. #, etc.
27. City & State
28. Zip
29. Country
30. Country

9. Name and Address of Current Registered Agent
FUCHS, HENRY
910 JEFFERSON AVENUE
MIAMI BEACH 33139

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	WASSERMAN, RITA	
STREET ADDRESS	910 JEFFERSON AVE	
CITY-ST-ZIP	MIAMI BCH FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	BEHAR, JENNY	
STREET ADDRESS	910 JEFFERSON AVE	
CITY-ST-ZIP	MIAMI BCH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BRENNER, MAE	
STREET ADDRESS	910 JEFFERSON AVE	
CITY-ST-ZIP	MIAMI BCH FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	EFRAIN, CABRERA	
STREET ADDRESS	910 JEFFERSON AVE	
CITY-ST-ZIP	MIAMI BCH FL	
TITLE	PRES	<input type="checkbox"/> DELETE
NAME	FUCHS, HENRY	
STREET ADDRESS	C/O. JEFFERSON AVE	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	YABLONSKY, RAY	
STREET ADDRESS	910 JEFFERSON AVE	
CITY-ST-ZIP	MIAMI BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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]* Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/96
Date
Business Phone #

CR2E037 (12/95)