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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # 720135 (3)

1. Corporation Name
7720 CONDOMINIUM INC.

Principal Place of Business	Mailing Address
7720 BYRON AVENUE APT #4 MIAMI BEACH FL 33141 US	7720 BYRON AVENUE APT #4 MIAMI BEACH FL 33141-2366 US

3. Date Incorporated or Qualified: 01/27/1971
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21 7720 BYRON AVE.
Suite, Apt #, etc.
22 3
City & State
23 MIAMI BEACH, FL
Zip 24 33141 Country 25 USA

2a. Mailing Address
26 7720 BYRON AVE.
Suite, Apt. #, etc.
27 3
City & State
28 MIAMI BEACH, FL
Zip 29 33141 Country 30 USA

4. FEI Number: 59-2237196 ☐ 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

9. Name and Address of Current Registered Agent

MARKEL, FERNANDEZ
7720 BYRON AVENUE
APT #2
MIAMI BEACH FL 33141

10. Name and Address of New Registered Agent

81 Name: ARSENIO PARDO
82 Street Address (P.O. Box Number is Not Acceptable): 7720 BYRON AVE
83: 3
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: ARSENIO PARDO 01/06/97
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FERNANDEZ, MARKEL 7720 BYRON AVE F#2 MIAMI BEACH FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD ARSENIO, PARDO 7720 BYRON AVE #3 MIAMI BEACH, FL. 33141	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD ARSENIO, PARDO 7720 BYRON AVE #3 MIAMI BEACH FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VTD MARKEL FERNANDEZ 7720 BYRON AVE # 2 MIAMI BEACH, FL. 33141	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GONZALEZ, LUCY 7720 BYRON AVE #1 MIAMI BEACH FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SD MERCEDES MEDINA 7720 BYRON AVE #1 MIAMI BEACH, FL. 33141	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DIAZ, JOSE 7720 BYRON AVE #4 MIAMI BCH. FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/96)

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: ARSENIO PARDO 01/06/96 (305) 4426853
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0029814