

DOCUMENT # 725576

1. Entity Name

FLAGLER PLAZA CONDOMINIUM ASSOCIATION, INC.

FILED
May 02, 2000 8:00 am
Secretary of State

03-02-2000 90126 047 ****61.25

Principal Place of Business	Mailing Address
3001 S.W. 2ND STREET APT. 113-C MIAMI FL 33135	3001 S.W. 2ND STREET APT. 113-C MIAMI FL 33135-2760

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State	4. FEI Number	Applied For
		59-1651473	Not Applicable

Zip	Country	Zip	Country	5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GONZALEZ EDUARDO
 3001 SW 2ND ST
 115C
 MIAMI FL 33135

7. Name and Address of New Registered Agent

Name

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

City

FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE: *Eduardo Gonzalez* DATE: 2-7-2000

Signature, typed or printed name of registered agent and title if applicable (Notar. Registered Agent signature required when reinstating)

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	V - D	<input type="checkbox"/> Delete
NAME	ECHENIQUE CHARLES	
STREET ADDRESS	160 SW 30TH AVE 206A	
CITY-ST-ZIP	MIAMI FL	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	SUAREZ, MANUEL	
STREET ADDRESS	3001 S.W. 2ND ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	VT	<input type="checkbox"/> Delete
NAME	GONAZALEZ, EDUARDO	
STREET ADDRESS	3001 SW 2ND AVE #115C	
CITY-ST-ZIP	MIAMI FL 33135	
TITLE	VS	<input type="checkbox"/> Delete
NAME	COTARELO, PEDRO	
STREET ADDRESS	3001 SW 2ND ST	
CITY-ST-ZIP	MIAMI FL 33135	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	LOPEZ, BARBARA	
STREET ADDRESS	3001 S.W. 2ND STREET	
CITY-ST-ZIP	MIAMI FL 33135	
TITLE	S - D	<input type="checkbox"/> Delete
NAME	BOGIN, VINCENT	
STREET ADDRESS	160 SW 30TH AVE	
CITY-ST-ZIP	MIAMI FL 33135	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT - D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ECHENIQUE, CHARLES	
STREET ADDRESS	160 SW 30TH AVE # 206A	
CITY-ST-ZIP	MIAMI-FL 33135	
TITLE	VICE-PRES. - D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COTARELO, PEDRO	
STREET ADDRESS	3001 SW 2ND ST	
CITY-ST-ZIP	MIAMI-FL 33135	
TITLE	TREASURER - D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GONZALEZ, EDUARDO	
STREET ADDRESS	3001 SW 2ND ST	
CITY-ST-ZIP	MIAMI-FL 33135	
TITLE	VICE-TREASURER - D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HALDO, ELENA	
STREET ADDRESS	3001 S.W. 2ND ST.	
CITY-ST-ZIP	MIAMI-FL 33135	
TITLE	VICE-SECRETARY - D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	QUEDADA, LUIS A.	
STREET ADDRESS	3001 SW 2ND ST.	
CITY-ST-ZIP	MIAMI-FL 33135	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Eduardo Gonzalez* / EDUARDO GONZALEZ (D) DATE: 2/7/00 305-642-5172

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/99)