

FILE NOW: FILING FEE IS \$61.25

FILED  
Jan 16 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 # 726872 (5)  
1. Corporation Name  
CORAL GARDENS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 3431 SW 9TH TERRACE APT #1 MIAMI FL 33135  
Mailing Address: 3431 SW 9TH TERRACE APT #1 MIAMI FL 33135

3. Date Incorporated or Qualified: 07/05/1973  
4. FEI Number: 59-1544847  
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 MIAMI FLORIDA  
Suite, Apt. #, etc.: 22 # 1 and 2  
City & State: 23 Miami  
Zip: 24 33135  
Country: 25 U.S.A.

2a. Mailing Address: 26 3411 S.W. 9th Terrace  
Suite, Apt. #, etc.: 27 No. 2  
City & State: 28 Florida 33135  
Zip: 29  
Country: 30

9. Name and Address of Current Registered Agent  
LORIE, JORGE R.  
3431 SW 9 TERRACE  
MIAMI FL 33135

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JORGE, LORIE R.	1.2 NAME	
STREET ADDRESS	3431 SW 9TH STREET # 2	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33135	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZALDIVAR, GLADYS	2.2 NAME	
STREET ADDRESS	3530 SW 10TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 00000	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARAL, ANA G.	3.2 NAME	
STREET ADDRESS	3530 SW 10TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 00000	3.4 CITY-ST-ZIP	
TITLE	VSD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUEZ, ANA M.	4.2 NAME	
STREET ADDRESS	3530 SW 10TH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 00000	4.4 CITY-ST-ZIP	
TITLE	VTD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TEJEDOR, MANUEL S.	5.2 NAME	
STREET ADDRESS	3530 SW 10TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 00000	5.4 CITY-ST-ZIP	
TITLE	TD	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAGEYRE, CARMEN L.	6.2 NAME	
STREET ADDRESS	3530 SW 10TH STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 00000	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: \_\_\_\_\_ DATE: 1/5/98 DAYTIME PHONE: 305 446-6439

CR2E037 (10/97)