

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED AND FILED

95 MAY -1 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995

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

DOCUMENT # 732594
1. Corporation Name
EASTVIEW VILLAS CONDOMINIUM ASSOCIATION

Principal Place of Business
950 EUCLID AVE
MIAMI BEACH FLA 33139

Mailing Address
SANDOR SCHEINER
950 EUCLID AVE
MIAMI BEACH FLA 33139

2. Principal Place of Business
21 SANDOR SCHEINER
22 950 EUCLID AVE
23 MIAMI BEACH FLA

2a. Mailing Address
26 SANDOR SCHEINER
27 950 EUCLID AVE
28 MIAMI BEACH FLA

24 Zip 33139 25 Country
29 Zip 30 Country

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 4/28-1975 3a. Date of Last Report 02-01-1994

4. FEI Number 59-1654694 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. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
SANDOR SCHEINER
950 EUCLID AVE
MIAMI BEACH FLA 33139

10. Name and Address of New Registered Agent
81 Name SANDOR SCHEINER
82 Street Address (P.O. Box Number is Not Acceptable) 950 EUCLID AVE APT 308
83
84 City MIAMI BEACH FL 85 Zip Code 33139

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Sandor Scheiner SEC. T. Sandor Scheiner - 28-95 DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP

1 D MARTON LOB PRES. 950 EUCLID AVE MIAMI BEACH

2 D BERTA WEISS VICE PRES. 950 EUCLID AVE MIAMI BEACH FLA 33139

3 SANDOR SCHEINER SEC. 950 EUCLID AVE MIAMI BEACH FLA 33139

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Change Addition

12 NAME

13 STREET ADDRESS 300001521423

14 CITY ST ZIP -06/23/95-01009 025

21 TITLE Change Addition

22 NAME *****130.00 *****130.00

23 STREET ADDRESS

24 CITY ST ZIP

31 TITLE Change Addition

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

41 TITLE Change Addition

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

51 TITLE Change Addition

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

61 TITLE Change Addition

62 NAME

63 STREET ADDRESS

64 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 110.07(3)(k), Florida Statutes. I further certify that the information indicated on the 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 017, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with my address.

SIGNATURE: MARTON LOB DATE 4-1 95 6734494