	FILE NOW: FIL	<u> </u>			OF STATE	- FIL	LED	
	RPORATION JAL REPORT		Sandra			Feb 03 19	98.8.0	0am
1998			Secretary of State DIVISION OF CORPORATIONS					
DOCUMENT # 733869 (2)						– Secretary of State		
	EN GLADES OFFICE PARK	CONDOMINI	LIM ASSC	CIATIC)			
N III, II					•			
rincipal Plac	e of Business	Mailing Add	dress					
0 NW 165TH IITE 311	STREET ROAD		560 NW 165TH STREET ROAD SUITE 311			3. Date Incorporated or Qualified	ι	
AMI FL 3316	9	MIAMI FL 33	169			09/19/1975 4. FEI Number		Applied For
Drineinel C	tace of Business	2a. Mailing	A -1-1		• ·	65-0072189		Not Applicable
		2a. Mailing	Address			5. Certificate of Status Desired		Additional Required
Wite, Apt.	#, etc.	Suite, A	pt. #, etc.			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
City & State	e	City & S	tate			7. Is this nonprofit corporation a ho	meowners associat	
Zip	Country	28 Zip		Co	untry	8. This corporation owes or has pail	Yes No	Intangible
	25 9. Name and Address of Curre	29 nt Registered Ag	ent	30	Γ	Personal Property Tax due June 10. Name and Address of New Reg		No No
			, , , , , , , , , , , , , , , , , , ,		81 Name		3	
FRAYND	-				82 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
560 NW 165TH ST. RD. STE. #311					83			
					~			
miami fi	_ 33169				84 City			p Code
Pursuant t office or ri agent, I ai	_ 33169	02 and 617.1508, e of Florida. Such ations of, Section	Florida Statu change was 617.0503, F	tes, the a authorize lorida Sta	84 City	rporation submits this statement for the p ation's board of directors. I hereby accep		
Pursuant I office or re agent, I al	_ 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m famillar with, and accept the oblig Signature. typed or printed name of registered ag				84 City bove-named coi d by the corpora tutes.	rporation submits this statement for the p ation's board of directors. I hereby accep uired when reinstating) ADDITIONS/CHANGES TO OFFIC	urpose of changing the appointment a	its registered as registered
MIAMI FL • Pursuant t office or m agent. Lan IGNATURE _	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS AN PD	ent and title if applicable		TE: Registere 13. 1.1 T	84 City bove-named cou d by the corpora tutes. d Agent signature requ	uired when reinstating)	urpose of changing the appointment a	its registered as registered
MIAMI FL • Pursuant 1 office or m agent. Lang GNATURE _ LE ME	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS AN	ent and title if applicable	(NO	TE: Registere 13. 1.1 T 1.2 N	84 City bove-named cou d by the corpora tutes. d Agent signature requ	uired when reinstating)	DATE ERS AND DIRECTO	its registered as registered
MIAMI FL - Pursuant I office or rr agent. Lau GNATURE _ - - - - - - - - - - - - -	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL	ent and litle if applicable ID DIRECTORS	DELETE	TE: Registere 13. 1.1 T 1.2 N 1.3 S 1.4 C	84 City bove-named coi d by the corpora tutes. d Agent signature required ITLE AME TREET ADDRESS ITY-ST-ZIP	uired when reinstating)	PL urpose of changing ot the appointment a DATE ERS AND DIRECTO Change	its registered as registered DRS IN 12
MIAMI FL - Pursuant 1 office or n agent. La GNATURE _ - - LE ME ME TeET ADORESS Y-ST-ZIP LE	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311	ent and litle if applicable ID DIRECTORS	(NO	TE: Registere 13. 1.1 T 1.2 N 1.3 S	84 City bove-named coil by the corporative requires. Id Agent signature requires. Integration of the signature requires. ITLE AME TREET ADDRESS ITY-ST-ZIP TILE Integration of the signature requires.	uired when reinstating)	DATE ERS AND DIRECTO	its registered as registered DRS IN 12
MIAMI FL - Pursuant f office or rr agent. La GNATURE _ - - - - - - - - - - - - -	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311	ent and litle if applicable ID DIRECTORS	DELETE	TE: Registere 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S	84 City bove-named coid by the corporative id Agent signature requires. Integration ITLE AME ITY-ST-ZIP Integration ITREET ADDRESS Integration ITREET ADDRESS Integration	uired when reinstating)	PL urpose of changing ot the appointment a DATE ERS AND DIRECTO Change	its registered as registered DRS IN 12
MIAMI FL - Pursuant I office or rr agent. Lau GNATURE _ - - - - - - - - - - - - -	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311 MIAMI FL SD	ent and litle if applicable ID DIRECTORS [DELETE	TE: Registere 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S	84 City bove-named coil corporative id by the corporative corporative id Agent signature require corporative ITLE AME ITV-ST-ZIP corporative ITREET ADDRESS corporative ITLE AME ITLE corporative AME corporative ITLE corporative AME corporative ITLE corporative AME corporative ITY-ST-ZIP corporative	uired when reinstating)	PL urpose of changing ot the appointment a DATE ERS AND DIRECTO Change	Its registered
MIAMI FL - Pursuant 1 office or n agent. Lau GNATURE _ LE ME REET ADORESS Y-ST-ZIP LE REET ADDRESS Y-ST-ZIP LE ME ME	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311 MIAMI FL SD FRAYND, SAUL	ent and litle if applicable ID DIRECTORS [OLO	TE: Registere 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (1 3.1 T 3.2 N	84 City bove-named coil by the corporative id Agent signature requires. Integration ITLE AME ITY-ST-ZIP Integration ITLE AME ITLE AME ITLE AME ITLE AME ITY-ST-ZIP Integration ITLE AME	uired when reinstating)	L Urpose of changing ot the appointment a DATE ERS AND DIRECTO Change Change	Its registered
MIAMI FL • Pursuant 1 office or rn agent, I ai GNATURE	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311 MIAMI FL SD	ert and title if applicable ID DIRECTORS [DELETE	TE: Registor 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (1 3.1 T 3.2 N 3.3 S	84 City bove-named coil corporative id by the corporative corporative id Agent signature require corporative ITLE AME ITY-ST-ZIP corporative ITREET ADDRESS corporative ITY-ST-ZIP corporative ITTET ADDRESS corporative ITY-ST-ZIP corporative ITLE corporative	uired when reinstating)		its registered as registered DRS IN 12 a Addition a Addition
MIAMI FL Office or n agent. Lau GNATURE LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311 MIAMI FL SD FRAYND, SAUL 560 NW 165TH ST RD #311	ert and title if applicable ID DIRECTORS [OLO	TE: Register 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (3.1 T 3.2 N 3.3 S 3.4 C 4.1 T	84 City bove-named could by the corporatives. City Id Agent signature requires. City ITLE AME TREET ADDRESS City-ST-ZIP TILE AME ITLE AME TREET ADDRESS City-ST-ZIP TILE AME IREET ADDRESS City-ST-ZIP TILE AME TREET ADDRESS City-ST-ZIP TLE City-ST-ZIP	uired when reinstating)	L Urpose of changing ot the appointment a DATE ERS AND DIRECTO Change Change	its registered as registered DRS IN 12 a Addition a Addition
MIAMI FL - Pursuant 1 office or n agent. Lau GNATURE _ - - - - - - - - - - - - -	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311 MIAMI FL SD FRAYND, SAUL 560 NW 165TH ST RD #311	ert and title if applicable ID DIRECTORS [DELETE	TE: Register 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (1 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N	84 City bove-named could by the corporatives. City Id Agent signature requires. City ITLE AME TREET ADDRESS City-ST-ZIP TILE AME ITLE AME TREET ADDRESS City-ST-ZIP TILE AME IREET ADDRESS City-ST-ZIP TILE AME TREET ADDRESS City-ST-ZIP TLE City-ST-ZIP	uired when reinstating)		its registered as registered DRS IN 12 a Addition a Addition
MIAMI FL • Pursuant 1 office or n agent. Lau GNATURE _ • • • • • • • • • • • • •	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311 MIAMI FL SD FRAYND, SAUL 560 NW 165TH ST RD #311	ert and title if applicable ID DIRECTORS	DELETE	TE: Register 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (1 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S	84 City bove-named could by the corporatives. City Id Agent signature requires. City ITLE AME ITLE AME ITREET ADDRESS City-St-ZIP ITLE IAME ITREET ADDRESS City-St-ZIP	uired when reinstating)		its registered as registered DRS IN 12 DRS IN 12 Addition Addition Addition Addition
MIAMI FL Pursuant f office or n agent, l au GNATURE _ LE ME LE ME LET ADORESS Y-ST-ZIP LE ME LET ADDRESS Y-ST-ZIP LE ME LET ADDRESS Y-ST-ZIP LE AE LET ADDRESS Y-ST-ZIP LE AE LET ADDRESS Y-ST-ZIP LE AE LET ADDRESS Y-ST-ZIP LE AE	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311 MIAMI FL SD FRAYND, SAUL 560 NW 165TH ST RD #311	ert and title if applicable ID DIRECTORS	DELETE DELETE DELETE DELETE	TE: Register 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (1 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T 5.2 N	84 City bove-named coil bove the corporative requires. rd Agent signature requires. rttl AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS ITY-ST-ZIP TLE IAME TREET ADDRESS ITY-ST-ZIP TLE IAME TREET ADDRESS TY-ST-ZIP TLE IAME	uired when reinstating)		its registered as registered DRS IN 12 DRS IN 12 Addition Addition Addition Addition
MIAMI FL • Pursuant f office or n agent. Lau GNATURE _ • • • • • • • • • • • • •	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311 MIAMI FL SD FRAYND, SAUL 560 NW 165TH ST RD #311	ert and title if applicable ID DIRECTORS	DELETE DELETE DELETE DELETE	TE: Register 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (1 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S	84 City bove-named could by the corporatures. City Id Agent signature required City ITLE AME ITREET ADDRESS City-ST-ZIP ITLE AME IREET ADDRESS City-ST-ZIP ITLE AME IREET ADDRESS City-ST-ZIP ITLE AME IREET ADDRESS City-ST-ZIP ITLE IAME IREET ADDRESS City-ST-ZIP TLE IAME IREET ADDRESS City-ST-ZIP TLE IAME IREET ADDRESS City-ST-ZIP TLE IAME IREET ADDRESS City-ST-ZIP	uired when reinstating)		its registered as registered DRS IN 12 DRS IN 12 Addition Addition Addition Addition
MIAMI FL Office or n agent. Lau GNATURE _ C C C C C C C C C C C C C	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311 MIAMI FL SD FRAYND, SAUL 560 NW 165TH ST RD #311	ent and title if applicable ID DIRECTORS	DELETE DELETE DELETE DELETE	TE: Register 13. 1.1 T 12 N 1.3 S 1.4 C 2.1 T 2.2 N 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 T	84 City bove-named coil bove the corporative requires. Id Agent signature requires. ITLE AME ITLE AME ITREET ADDRESS XTY-ST-ZIP ITLE AME IREET ADDRESS XTY-ST-ZIP TILE AME IREET ADDRESS ITY-ST-ZIP TLE IAME IREET ADDRESS ITY-ST-ZIP TLE IAME IREET ADDRESS ITY-ST-ZIP TLE ITY-ST-ZIP	uired when reinstating)		its registered as registered DRS IN 12 DRS IN 12 Addition Addition Addition Addition Addition Addition Addition
MIAMI FL • Pursuant f office or rr agent. Lau GNATURE _ • • • • • • • • • • • • •	- 33169 to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed neme of registered ag OFFICERS AN PD FRAYND, PAUL 560 NW 165TH ST RD #311 MIAMI FL VD FRAYND, LINDA STEIN 560 NW 165TH ST RD #311 MIAMI FL SD FRAYND, SAUL 560 NW 165TH ST RD #311	ent and title if applicable ID DIRECTORS	DELETE DELETE DELETE DELETE DELETE DELETE	TE: Register 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 (1 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 TL 6.2 N	84 City bove-named coil bove the corporative requires. Id Agent signature requires. ITLE AME ITLE AME ITREET ADDRESS XTY-ST-ZIP ITLE AME IREET ADDRESS XTY-ST-ZIP TILE AME IREET ADDRESS ITY-ST-ZIP TLE IAME IREET ADDRESS ITY-ST-ZIP TLE IAME IREET ADDRESS ITY-ST-ZIP TLE ITY-ST-ZIP	uired when reinstating)		its registered as registered DRS IN 12 DRS IN 12 Addition Addition Addition Addition Addition Addition Addition

.