

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90013 022 ****61.25

0033956

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 734628

1. Corporation Name

PARKWOOD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

275 FONTAINBLEAU BLVD.
#140
MIAMI FL 33172

Mailing Address

275 FONTAINBLEAU BLVD.
#140
MIAMI FL 33172



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

12/18/1975

4. FEI Number

59-1465545

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

9. Name and Address of Current Registered Agent

PIQUE, SYLVIA
C/O EXCEL MANAGEMENT
275 FONTAINEBLEAU BLVD., #140
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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

Alfonso Otero, President

3/1/99

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD DELETE

NAME ORERO, ALFONSO
STREET ADDRESS 9240 FONTAINEBLEAU BLVD., #504
CITY-ST-ZIP MIAMI FL 33172

TITLE VD DELETE

NAME RODRIGUEZ, SARA
STREET ADDRESS 9280 FONTAINEBLEAU BLVD., #404
CITY-ST-ZIP MIAMI FL 33172

TITLE TD DELETE

NAME DISELKS, ABEL
STREET ADDRESS 9250 FONTAINEBLEAU BLVD., #209
CITY-ST-ZIP MIAMI FL 33172

TITLE D DELETE

NAME VILLA, LIDIA
STREET ADDRESS 9280 FONTAINEBLEAU BLVD., #401
CITY-ST-ZIP MIAMI FL 33172

TITLE D DELETE

NAME SAAVEDRA, FRANCISCO
STREET ADDRESS 9270 FONTAINEBLEAU BLVD., #401
CITY-ST-ZIP MIAMI FL 33172

TITLE D DELETE

NAME GUEMES, MIRIAM
STREET ADDRESS 9270 FONTAINEBLEAU BLVD., #304
CITY-ST-ZIP MIAMI FL 33172

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P Change Addition

1.2 NAME Otero, Alfonso
1.3 STREET ADDRESS 9240 Fontainebleau Blvd. #504
1.4 CITY-ST-ZIP Miami, FL 33172

2.1 TITLE Change Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE T Change Addition

3.2 NAME Desilles, Abel
3.3 STREET ADDRESS 9250 Fontainebleau Blvd. #209
3.4 CITY-ST-ZIP Miami, FL 33172

4.1 TITLE Change Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE S Change Addition

6.2 NAME Sori, Aida
6.3 STREET ADDRESS 9280 Fontainebleau Blvd. #304
6.4 CITY-ST-ZIP Miami, FL 33172

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Alfonso Otero 3-1-99 305-297-1311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)