

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

95 FEB -8 AM 9:43

**DOCUMENT # 747594 (0)**  
1. Corporation Name  
**PINE LAKE VILLAGE CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business Mailing Address  
**% J & M CONDO MANAGEMENT & MAINTENANCE INC** **% J & M CONDO MANAGEMENT & MAINTENANCE INC**  
221 SW 22ND AVENUE SUITE 219 221 SW 22ND AVENUE SUITE 219  
MIAMI FL 33135 MIAMI FL 33135

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **06/12/1979** 3a. Date of Last Report **02/09/1994**  
4. FEI Number **59-2023110** 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

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip Country 29 Zip Country 30  
24 25 29 30

9. Name and Address of Current Registered Agent  
**LERNER, LISA A.**  
**% SIEGFRIED, KIPNIS & RIVERA, P.A.**  
**1570 MADRUGA AVE., STE. 300**  
**CORAL GABLES FL 33146**

10. Name and Address of New Registered Agent  
81 Name **Nestor Alvarez, P.A.**  
82 Street Address (P.O. Box Number is Not Acceptable) **3971 S.W. 8th St. #209**  
83 **Coral Gables,**  
84 City **FL** 85 Zip Code **33134**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
TITLE **P**  
NAME **BRITO, JESUS**  
STREET ADDRESS **8879-A FONTAINEBLEAU BLVD**  
CITY-ST-ZIP **MIAMI, FL 00000**  
TITLE **SD**  
NAME **DECUBAS, LUIS**  
STREET ADDRESS **8881A FONTAINEBLEAU BLVD, STE 501**  
CITY-ST-ZIP **MIAMI, FL 00000**  
TITLE **VD**  
NAME **FELIX, CARLOS**  
STREET ADDRESS **8881-B FONTAINEBLEAU BLVD #501**  
CITY-ST-ZIP **MIAMI, FL 00000**  
TITLE **TD**  
NAME **RODRIGUEZ, JUAN J**  
STREET ADDRESS **8877-B FONTAINEBLEAU BLVD #102**  
CITY-ST-ZIP **MIAMI, FL 00000**  
TITLE **D**  
NAME **ZARZA, GUILLERMO**  
STREET ADDRESS **8877-A FONTAINEBLEAU BLVD #108**  
CITY-ST-ZIP **MIAMI FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE **P**  Change  Addition  
1.2 NAME **Escobar, Enrique**  
1.3 STREET ADDRESS **8881-B Fontainebleau Blvd. #205**  
1.4 CITY-ST-ZIP **Miami, Fl. 33172**  
2.1 TITLE **VP**  Change  Addition  
2.2 NAME **Felix, Carlos**  
2.3 STREET ADDRESS **8881-B Fontainebleau Blvd. #501**  
2.4 CITY-ST-ZIP **Miami, Fl. 33172**  
3.1 TITLE **T**  Change  Addition  
3.2 NAME **Riggott, Victoria**  
3.3 STREET ADDRESS **8879-B Fontainebleau Blvd.#102**  
3.4 CITY-ST-ZIP **Miami, Fl. 33172**  
4.1 TITLE **S**  Change  Addition  
4.2 NAME **Mederos, Esther**  
4.3 STREET ADDRESS **8873-B Fontainebleau Blvd. #205**  
4.4 CITY-ST-ZIP **Miami, Fl. 33172**  
5.1 TITLE **D**  Change  Addition  
5.2 NAME **De Cubas, Luis**  
5.3 STREET ADDRESS **8881-A Fontainebleau Blvd. #507**  
5.4 CITY-ST-ZIP **Miami, Fl. 33172**  
6.1 TITLE **D**  Change  Addition  
6.2 NAME **Martin, Mireya**  
6.3 STREET ADDRESS **8885 Fontainebleau Blvd. #104**  
6.4 CITY-ST-ZIP **Miami, Fl. 33172**

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 included 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: **1/26/95** 225-2269