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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 748071

1. Corporation Name

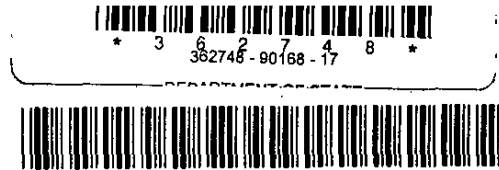
PARKVIEW PLAZA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

7300 WAYNE AVENUE
MIAMI BCH FL 33141

Mailing Address

7300 WAYNE AVENUE
MIAMI BCH FL 33141



2. Principal Place of Business

21 Suite, Apt. #, etc.

City & State

23 Zip

Country

24 **25**

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

28 Zip

Country

29 **30**

3. Date Incorporated or Qualified

07/12/1979

4. FEI Number

59-2204199

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Election Campaign Financing



\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

RAPOPORT, ALLEN J
7300 WAYNE AVE.
#505
MIAMI BEACH FL 33141

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

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	ELJAS, FANI	
STREET ADDRESS	7300 WAYNE AVE / STE - 208	
CITY-ST-ZIP	MIAMI BCH, FL 33141	
TITLE	TS	☐ DELETE
NAME	ALVAREZ, BLANCA	
STREET ADDRESS	7300 WAYNE AVENUE STE. 305	
CITY-ST-ZIP	MIAMI BCH FL 33141	
TITLE	VT	☒ DELETE
NAME	CLAUDIA ESTRADA	
STREET ADDRESS	7300 WAYNE AVE #317	
CITY-ST-ZIP	MIAMI BCH, FL 33141 33141	
TITLE	PD	☐ DELETE
NAME	MARINA GERSHANOVICH	☒ XADDIT
STREET ADDRESS	7300 WAYNE AVE, # 307	
CITY-ST-ZIP	MIAMI BEACH, FL 33141	
TITLE	D	☐ DELETE
NAME	ZORAN VISNJIC	☒ X ADD
STREET ADDRESS	7300 WAYNE AVENUE, # 203	
CITY-ST-ZIP	MIAMI BEACH, FL 33141	
TITLE	D	☐ DELETE
NAME	RACHEL HERES	☒ X ADD
STREET ADDRESS	7300 WAYNE AVE, # 508	
CITY-ST-ZIP	MIAMI BEACH, FL 33141	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☒ Change ☐ Addition
1.2 NAME	ELIAS, FANI	
1.3 STREET ADDRESS	7300 WAYNE AVE / STE 208	
1.4 CITY-ST-ZIP	MIAMI BEACH, FL 33141	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	D	☐ Change ☒ Addition
3.2 NAME	LEONID RUSAKOV	
3.3 STREET ADDRESS	7300 WAYNE AVENUE, # 320	
3.4 CITY-ST-ZIP	MIAMI BEACH, FL 33141	
4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	JUAN LINARTE	
4.3 STREET ADDRESS	7300 WAYNE AVENUE #517	
4.4 CITY-ST-ZIP	MIAMI BEACH, FLORIDA 33141	
5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	JOHN GARAY	
5.3 STREET ADDRESS	7300 WAYNE AVENUE, # 204	
5.4 CITY-ST-ZIP	MIAMI BEACH, FL 33141	
6.1 TITLE	D	☐ Change ☒ Addition
6.2 NAME	ALBA M MUNIZ	
6.3 STREET ADDRESS	7300 WAYNE AVENUE # 218	
6.4 CITY-ST-ZIP	MIAMI BEACH, FL 33141	

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:

F. J. [Signature] DIRECTOR

04-12-99

(305) 866-4499

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)