

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Feb 03 1998 8:00am
Secretary of State

DOCUMENT # 751960 (6)

1. Corporation Name

TEMPO CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

4275 N.W. 18TH STREET #316
MIAMI FL 33126

Mailing Address

275 FOUNTAIN BLEAU BLVD
SUITE 200
MIAMI FL 33172
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

ALVAREZ, NESTOR
C/O J&M CONDO. MANAGEMENT, INC.
221 SW 22 AVENUE, #219
MAIMI FL 33135

3. Date Incorporated or Qualified

04/10/1980

4. FEI Number

59-2033843

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. Is this nonprofit corporation a homeowners association?

☐ Yes

☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

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

☐ DELETE

TITLE

P

NAME

GIEGLE, HERBERT

STREET ADDRESS

4265 NW 18TH ST. 210

CITY-ST-ZIP

MIAMI FL

TITLE

T

NAME

REYES, LIZZETTE

STREET ADDRESS

4265 NW 18 STREET, #205

CITY-ST-ZIP

MIAMI FL

TITLE

D

NAME

ARABI, ELIZABETH

STREET ADDRESS

4265 NW 18TH ST., #114

CITY-ST-ZIP

MIAMI FL

TITLE

D

NAME

~~VAL, LUIS~~

STREET ADDRESS

4275 NW 18TH ST #102

CITY-ST-ZIP

MIAMI FL

TITLE

D

NAME

PEREZ, OSCAR

STREET ADDRESS

4275 NS 18TH ST #314

CITY-ST-ZIP

MIAMI FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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.

SIGNATURE:

[Signature] A. REYES 1/20/98

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1086

CR2E037 (10/97)