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Feb 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **758183** (8)

KENDALL CROSSINGS WAREHOUSE CENTER CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 12201-12231 SW 131 AVE MIAMI FL 33156 US	Mailing Address C/O SHANE SUCHMAN, R. E. CO. 1550 MADRUGA AVE. S230 CORAL GABLES FL 33146 US
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3. Date Incorporated or Qualified 10/28/1981
4. FEI Number 59-2144942
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

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

9. Name and Address of Current Registered Agent SHANE, MARTIN H. 1550 MADRUGA AVE S230 CORAL GABLES FL 33146	10. Name and Address of New Registered Agent International Real Estate Exch Inc 13000 SW 120 St Miami FL 33186
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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: Rose G. Brown, manager for International Real Estate Exch Inc 2/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE Secretary	NAME SHANE, MARTIN H.	1.1 TITLE
STREET ADDRESS 1550 MADRUGA	CITY-ST-ZIP CORAL GABLES FL	1.2 NAME
TITLE VD	NAME SUCHMAN, CLIFFORD L.	1.3 STREET ADDRESS
STREET ADDRESS 1550 MADRUGA AVE	CITY-ST-ZIP CORAL GABLES FL	1.4 CITY-ST-ZIP
TITLE D	NAME SENSALE, JAMES	2.1 TITLE
STREET ADDRESS 12215 SW 181 AVE	CITY-ST-ZIP MIAMI FL	2.2 NAME
TITLE President	NAME Janet Patricia Blank	2.3 STREET ADDRESS
STREET ADDRESS 12229 SW 131 Ave	CITY-ST-ZIP Miami, FL 33186	2.4 CITY-ST-ZIP
TITLE Gene Kohly	NAME	3.1 TITLE
STREET ADDRESS 12227 SW 181 Ave	CITY-ST-ZIP Miami, FL 33186	3.2 NAME
TITLE	NAME	3.3 STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP	3.4 CITY-ST-ZIP
TITLE	NAME	4.1 TITLE
STREET ADDRESS	CITY-ST-ZIP	4.2 NAME
TITLE	NAME	4.3 STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP	4.4 CITY-ST-ZIP
TITLE	NAME	5.1 TITLE
STREET ADDRESS	CITY-ST-ZIP	5.2 NAME
TITLE	NAME	5.3 STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP	5.4 CITY-ST-ZIP
TITLE	NAME	6.1 TITLE
STREET ADDRESS	CITY-ST-ZIP	6.2 NAME
TITLE	NAME	6.3 STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP	6.4 CITY-ST-ZIP

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]

2.3.98

CF2E037 (10/97)