


FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 761098 (3)
 1. Corporation Name
ENVIRON TOWERS I CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 7200 RADICE COURT LAUDERHILL FL 33319	Mailing Address 7200 RADICE COURT LAUDERHILL FL 33319
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3. Date Incorporated or Qualified 02/04/1982	3a. Date of Last Report 03/01/1995
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2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 59-2179242	Applied For <input type="checkbox"/> Not Applicable
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
23. City & State	28. City & State	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24. Zip	25. Country	29. Zip	30. Country

9. Name and Address of Current Registered Agent KARO, SYLVIA 7100 RADICE COURT - 702 LAUDERHILL FL 33319	10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code <p style="text-align: right;">FL</p>
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11. Pursuant to the provisions of Sections 617.0502 and 617.150B, 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: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D RICHTER, SIDNEY <input checked="" type="checkbox"/> DELETE	1.1 TITLE	VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	7200 RADICE CT	1.2 NAME	MARTIN FELTNGOLD Director
STREET ADDRESS	LAUDERHILL FL	1.3 STREET ADDRESS	7100 Radice Ct. - 106
CITY-ST-ZIP		1.4 CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	T KARO, SYLVIA - Director <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	7100 RADICE COURT - 702	2.2 NAME	
STREET ADDRESS	LAUDERHILL FL 33319	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	S LIPSIT, REASA <input checked="" type="checkbox"/> DELETE	3.1 TITLE	SECRETARY Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	7100 RADICE COURT	3.2 NAME	HAROLD GREENBERG
STREET ADDRESS	LAUDERHILL FL	3.3 STREET ADDRESS	7200 RADICE COURT - 204
CITY-ST-ZIP		3.4 CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	P KARR, IRVING - Director <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	7200 RADICE CT. - 406	4.2 NAME	Irving Orovitz Director
STREET ADDRESS	LAUDERHILL FL	4.3 STREET ADDRESS	7200 Radice Ct.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	D ISER, WILLIAM <input checked="" type="checkbox"/> DELETE	5.1 TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	7200 RADICE COURT	5.2 NAME	IRVING ROSS
STREET ADDRESS	LAUDERHILL FL	5.3 STREET ADDRESS	7100 RADICE COURT
CITY-ST-ZIP		5.4 CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	P RAFAL, JULIA - Director <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	7100 RADICE CT. - 701	6.2 NAME	700001781097
STREET ADDRESS	LAUDERHILL FL	6.3 STREET ADDRESS	-04/15/96--01139--010
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***61.25

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 119.07(3)(k), 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: Sylvia Karo Treasurer 3/29/96 (954) 731-2880
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CF2E037 (12/95)