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May 10, 1999 8:00 am
Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 763976

1. Corporation Name

GARDEN LAKE TOWERS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

AMA MANAGEMENT
6850 CORAL WAY #308
MIAMI FL 33155
US

Mailing Address

C/O AMA MANAGEMENT SERVICES, INC.
6850 CORAL WAY #308
MIAMI FL 33155
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

3. Date Incorporated or Qualified

06/30/1982

4. FEI Number

59-2335769

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

9. Name and Address of Current Registered Agent

MORALES, ANICIA
6850 CORAL WAY #308
MIAMI FL 33155

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 **FLUTAS, PEDRO**
STREET ADDRESS **1101 SW 122ND AVENUE**
CITY-ST-ZIP **MIAMI, FL**

TITLE **TD** ☒ DELETE

NAME **SALAZAR, BENILDE**
STREET ADDRESS **1121 SW 122 AVENUE 207**
CITY-ST-ZIP **MIAMI FL**

TITLE **SD** ☐ DELETE

NAME **CARRILLO, SUSAU**
STREET ADDRESS **1101 SW 122ND AVE**
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☒ DELETE

NAME **FEBLES, EUGENIO**
STREET ADDRESS **1101 SW 122ND AVE**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **Ernesto Garcia Rubio**
1.3 STREET ADDRESS **1101 SW 122 Ave #309**
1.4 CITY-ST-ZIP **MIAMI, FL**

2.1 TITLE **D** ☒ Change ☐ Addition
2.2 NAME **Thomas Salazar**
2.3 STREET ADDRESS **1121 SW 122 Ave #207**
2.4 CITY-ST-ZIP **MIAMI, FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE **SD** ☒ Change ☐ Addition
4.2 NAME **Efren morales**
4.3 STREET ADDRESS **1101 SW 122 Ave #414**
4.4 CITY-ST-ZIP **MIAMI, FL 33**

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **Pedro Flutas**
5.3 STREET ADDRESS **1101 SW 122 Ave**
5.4 CITY-ST-ZIP **MIAMI, FL**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE:

[Signature] **President** 5-14-99 305-1699850

CR2E037 (11/98)