## **FILE NOW: FILING FEE IS \$61.25**

Mailing Address

P.O. POV 220107

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

DOCUMENT # 764538

1. Corporation Name

Principal Place of Business

2980 JACKSON AVE COCONUT GROVE FL 33133

CGV ASSOCIATION, INC.

2.	Principal Place of Bus	iness
21		
	Suite, Apt_#, etc	
22		
	City & State	
23		
	Zip	Country
		0.5

RITTENBERG, LEONARD 2980 JACKSON AVE P.O. BOX 0107

**COCONUT GROVE FL 33233** 

9. Name and Addre

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 04, 1999 8:00 am § Secretary of State

05-04-1999 90182 026 \*\*\*\*61.25

1	*

-R la	case	note	correc	tions
To	Add.	ress- an	d 2IP	Codes

	Applied For	
	Not Applicable	
\$8.75 Additional		
Fee Required		
\$5.00 May Be		
!	Added to Fees	

· <del></del> -
Zip Code
- r -

Pursuant to the provisions of Sections 617,0502 and 617,1506, Fronta Statutes, the Boy the corporation's board of directors. Thereby accept the appointment as registered directors.

agent. I a	in familiar with a same of the obligations of, Section 017.0003, Florid		. /	1 -	ì
SIGNATURE	Signature perfor printed name of registered agent and title if applicable. (NOTE: R	tegistered Agent alignature a	Aquired when reinstating) / DATE	1/99	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	D DELETE	1.1 TITLE	Director	☐ Change	Addition
NAME	RITTENBERG, LEONARD	1.2 NAME	Jose DIAZ 2950 Jackson		
STREET ADDRESS	2900 JACKSON AVE. 2980	1.3 STREET ADDRESS	2950 Jackson		
CITY-ST-ZIP	MIAMI FL 93139 33133	1.4 CITY-ST-ZIP	Miami FL 33133		
TITLE	D DELETE	2.1 TITLE		Change	Addition
NAME	TANNENBAUM, PAUL	2.2 NAME			
STREET ADDRESS	2050-JACKSON AVE. 2970	2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33/33	2.4 CITY-ST-ZIP			
TITLE	D DELETE	3.1 TTTLE		☐ Change	Addition Addition
NAME	GOES, FERNANDO S	3.2 NAME			
STREET ADORESS	2960 JACKSON AVE.	3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33133	3.4, CITY-ST-ZIP			
TITLE	. DELETE	4.1 TITLE		Change	☐ Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			<b>5</b> 4 4 1111
TITLE	DELETE	5.1 TITLE		Change	☐ Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			

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 of the corp

6.4 CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP