

FILE NOW: FILING FEE IS \$61.25

FILED
May 15 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 765872 (7)
 1. Corporation Name
9500 COMMERCIAL CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business		Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
245 SE FIRST ST STE 430 MIAMI FL 33131 US		245 SE FIRST ST STE 430 MIAMI FL 33131-1905 US		11/18/1982	05/01/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-2263266	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	<input type="checkbox"/>	
Zip	Country	29	30
24	25	29	30

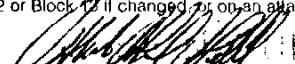
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
PESSIN, GREGG 1401 W FLAGLER ST STE 201 MIAMI FL 33135		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD SEREIX, LUIS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9500 NW 77TH AVE	1.2 NAME	
STREET ADDRESS	HIALEAH GRDNS, FL 00000	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	TD KEMPT, MIKE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9500 NW 77TH AVE	2.2 NAME	
STREET ADDRESS	HIALEAH GRDNS, FL 00000	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	SD HERNANDEZ, AUGUSTO	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9500 NW 77TH AVE	3.2 NAME	
STREET ADDRESS	HIALEAH GRDNS, FL 00000	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	VD MORELL, MIGUEL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9500 NW 77TH AVE	4.2 NAME	
STREET ADDRESS	HIALEAH GRDNS, FL 00000	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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, on an attachment with an address.

SIGNATURE:  Miguel Morell - Vice-President 4/25/97

CP2E037 (9/96)