NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 766621

1. Corporation Name

168 CONDOMINIUM ASSOCIATION, INC.

100 CONDON								
Principal Place of Busine 168 SE 1ST STREET SUITE 704 MIAMI FL 33131 US	Mailing Address P.O. BOX 110223 MIAMI FL 33111 US							
2. Principal Place of Bu	2a. Mailing Address	- Mailing Address			Qualifed			
21 168 SE	1Street	26			01/20/1983 4. FEI Number			pplied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			59-2425018			lot Applicable
22 # 800 City & State	<u>` </u>	City & State						Additional
الكارة عنونه	FloridA.	28			5. Certificate of Status De	sired 🔲	Fee R	equired
Zip	Country	Zip	Country	_	6. Election Campaign Fin	nancing	\$5.00	May Be
24 38131	25 U.S.	29	30		Trust Fund Contributio	n		to Fees
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
			81	Name			-	•
NANCI LANDY P.A.				Street	Address (P.O. Box Number is Not	Acceptable)		
150 SE 2 AVENUE								
SUITE 500				l l		-		
MIAMI FL 33131				City			85 Zip	Code
agent. I am familiar	with, and accept the obligati	ons or, section 617.0505, Flori	ua Siatute:	o.	corporation submits this statemen oration's board of directors. I here		e of changing it opointment as r	s registered egistered
	ped or printed name of registered agent		Registered Age	nt signature r	equired when reinstating) ADDITIONS/CHANGES			ORS IN 12
TITLE D	OFFICERS AND	DELETE	1.1 TITLE		ADDITIONS/GITANGEC	- 10 OTTIOETO	Change	
1 -	I, CARLOS	[OCCE16	1.2 NAME				•	
	VILAN AVE			TADORESS			. /	•
	GABLES FL 33143		1.4 CITY-5					
TITLE VD	<u> </u>	☐ DELETE	2.1 TITLE				☐ Change	☐ Addition
1 ' -	, MARCELO		2.2 NAME					
STREET ADDRESS 1541 BRICKELL AVE #2905		2.3 STREE	T ADDRESS					
CITY-ST-ZIP MIAMI F	L 33129		2, 4 CITY-	ST-ZIP				
		- DELETE	- 3.1 TITLE					Addition
	s, Leonerd		3.2 NAME				_	
STATE OF THE STATE			3.3 STREE	ET ADDRESS	•		• •	
Offic Of Ear	L 33132		3.4. CITY-		3.05.30-5		10 LOL	Addition
TITLE TD		☐ DELETÉ	4.1 TITLE		President		Change	

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 of the corporation in the receiver or director of the corporation in the receiver of the corporation in the receiver of the corporation in the receiver of the corporation in the

4, 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

Verite, Jordin

FI

16855

Wiadi

15troot #800

83131

SIGNATURE: *

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

VERIT, JORDIE

MIAMI FL 33131

MIAMI FL 33131

LEONE, MARCELO

168 SE 1ST STREET #500

168 SE 1ST STREET, 11TH FLOOR

SMATURE REQUIRED

☐ DELETE

☐ DELETE

Daytime Pf

Change

☐ Change

FILED

03-01-1999 90218 029 ****61.25

Mar 01, 1999 8:00 am Secretary of State

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Addition

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