FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

% VIVIENNE J KATZ

768796

(5)

Mailing Address

% VIVIENNE J KATZ

ARBORGATE AT KENDALL LAKES EAST, CONDOMINIUM NO 72 ASSOCIATION INC.

FILED Jan 27 1998 8:00am Secretary of State

3.	Date Incorporated or Qualified	

A SENALA MANA ALIAN ABINA MANA MANA MANA ARISA MANA ARANA ARIANA ARIANA ARIANA ARIANA

13549 SW 64T	H.LN. KENDALL LK E.	13549 SW 64TH.LN. KENDALL LK E. MIAMI FL 33183			06/07/1983 4. FEI Number Applied For			
MIAMI FL 3318	3							
							oplied For	
2. Principal P	lace of Business	2a. Mailing Address	roce		26-7340992		t Applicable	
21	1455 01 20011000	⊢	26		5. Certificate of Status Desired	58.75 / Fee Re	Additional	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing			
22		27			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
City & Stat	e	City & State			7. Is this nonprofit corporation a homeowners as			
23	28				©∑ies □ N			
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the current	year Int	angible	
24	25		30		Personal Property Tax due June 30.		No	
	9. Name and Address of Currer	t Registered Agent			Name and Address of New Registered Age	nt		
			81	Name				
KATZ, M	IRS VIVIENNE J		82	Street Add	dress (P.O. Box Number is Not Acceptable)			
13549 S	W 64TH LANE							
MIAMI F	L 33183		83					
			84	Cîty	8	5 Zip (Code	
44 Divisions	to the against of Captions C17.050	0 and 047 4500 Florida Otto	45		FL °			
office or r	egistered agent, or both, in the State	of Florida. Such change was au	thorized b	e-named cor y the corpora	rporation submits this statement for the purpose of cha ation's board of directors. I hereby accept the appoint	anging it ment as	s registered registered	
	m tamiliar with, and accept the obligi	ations of, Section 617,0503, Hore	da Statute	S.				
SIGNATURE _	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: 8	Registered Ag	ent signature requ	ulred when reinstating) DATE			
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIF	RECTOR	S IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE			Change	Addition	
NAME	KATZ, MRS VIVIENNE J		1.2 NAME	ŀ				
STREET ADDRESS	13549 SW 64TH LANE		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	MIAMI, FL 00000		1.4 CITY-	ST-21P				
TITLE	VPD	DELETE	2.1 TITLE			Change		
NAME	Zepeda, Hugo		2.2 NAME				İ	
STREET ADDRESS	13551 S.W. 64TH LANE		2.3 STREE	T ADDRESS	4		1	
CITY-ST-ZIP	MIAMI, FL 00000		2. 4 CITY-	ST-ZIP				
TITLE	STD	☐ DELETE	3.1 TITLE			Change	☐ Addition	
NAME	Katz, Bernard		3.2 NAME				1	
STREET ADDRESS	13549 S.W. 64TH LANE		3.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI, FL 00000		3.4. CITY-	ST-ZIP				
TITLE	TD	☐ DELETE	4.1 TITLE			Change	Addition	
NAME	Katz, Mr Bernard		4, 2 NAME					
STREET ADDRESS	13549 SW 64TH LANE		4.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI, FL 00000		4.4 CITY-5	ST-ZIP	•		l	
TITLE		DELETE	5.1 TITLE			Change	☐ Addition	
NAME			5.2 NAME				ŀ	
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP			-	
TITLE		DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME]			ļ	
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY - S	T-ZIP				
14. I hereby c	ertify that the information supplied wi	th this filing does not qualify for t	the exemp	tion stated in	n Section 119.07(3)(i), Florida Statutes. I further certify ure shall have the same legal effect as if made under o	that the	information	
indicated i	on this annual report of supplementa	i annual report is true and accura	ate and th	at my signati	ure shall have the same legal effect as if made under o	oath; tha	tiam 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.