

FILED
 Aug 07 1997 8:00am
 Secretary of State

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 770895 (4)
 1. Corporation Name
 KENDALL CROSSINGS COMMERCE CENTER SECTION TWO CO
 NDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
 12252 12294
 SW THRU SW 131 AVE SW 131 AVE
 MIAMI FL 33186 MIAMI FL 33156-3613
 JS

3. Date Incorporated or Qualified 10/24/1983
 3a. Date of Last Report 05/20/1996
 4. FEI Number 59-2735339 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
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
 1) Suite, Apt. #, etc. 2b) Suite, Apt. #, etc.
 2) City & State 27) City & State
 3) Zip 28) Country 29) Zip 30) Country

9. Name and Address of Current Registered Agent
 KENNEDY, TYRONE G
 7885 S.W. 108TH STREET
 MIAMI FL 33156-3613

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 TYRONE G. KENNEDY (NOTE: Registered Agent Signature required when registering) DATE 5-15-97

12. OFFICERS AND DIRECTORS 13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CASTILLO, DAGOBERTO	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	12240 S.W. 131 AVENUE		1.2 NAME	
STREET ADDRESS	MIAMI, FL 33186		1.3 STREET ADDRESS	
CITY-ST-ZIP			1.4 CITY-ST-ZIP	
TITLE	FOGG, JOHN	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	6620 S.W. 6TH STREET		2.2 NAME	
STREET ADDRESS	MIAMI, FL 33144		2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE	FOX, SUZANNE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	13101 S.W. 87 AVENUE		3.2 NAME	
STREET ADDRESS	MIAMI, FL 33176		3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE	CROSBY, SARA	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8295 SW 153 STREET		4.2 NAME	
STREET ADDRESS	MIAMI, FL 33157		4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE	CABELLO, ALBERT	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	12262 S.W. 131 AVENUE		5.2 NAME	
STREET ADDRESS	MIAMI, FL 33186		5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	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	

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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, or on an attachment with an address.

CR2E037 (9/96)