

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N07654 (9)
1. Corporation Name
NEW WORLD II CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 1480-A NW 107TH AVE. MIAMI FL 33172	Mailing Address 1480-A NW 107TH AVE. MIAMI FL 33172
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3. Date Incorporated or Qualified 02/15/1985		
4. FEI Number 59-2530211	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>

21. Principal Place of Business 1460 A. NW 107 AVE.	2a. Mailing Address 1460 A NW 107 AVE..		
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.		
23. City & State MIAMI FL 33172	28. City & State MIAMI FL		
24. Zip 33172	25. Country MIAMI Dale	29. Zip 33172	30. Country MIAMI Dale

5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**ISERN, JOSEPH P. - RES. MGR.
1480-A NW 107TH AVE.
MIAMI FL 33172**

10. Name and Address of New Registered Agent

81 Name Same as 1996-97.	
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: **Joseph P. ISERN - MGR. Sec. TRAS.** *[Signature]* **2/15/98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME MESA, NOELIA	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1460 Q NW 107TH AVE.	CITY-ST-ZIP MIAMI FL	1.2 NAME	
TITLE D	NAME FAMADA, MARIO	1.3 STREET ADDRESS	
STREET ADDRESS 1470 C NW 107TH AVE.	CITY-ST-ZIP MIAMI FL	1.4 CITY-ST-ZIP	
TITLE DST	NAME ISERN, JOSEPH	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1460A NW 107 AV	CITY-ST-ZIP MIAMI FL	2.2 NAME	
TITLE D	NAME SEGRERA, PEDRO	2.3 STREET ADDRESS	
STREET ADDRESS 1460-M NORTHWEST 107 AVENUE	CITY-ST-ZIP MIAMI FL	2.4 CITY-ST-ZIP	
TITLE DV	NAME OROZCO, PABLO	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1450 NORTHWEST 107 AVENUE	CITY-ST-ZIP MIAMI FL	3.2 NAME	
TITLE	NAME	3.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	3.4 CITY-ST-ZIP	
CITY-ST-ZIP	NAME	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	STREET ADDRESS	4.2 NAME	
	CITY-ST-ZIP	4.3 STREET ADDRESS	
	CITY-ST-ZIP	4.4 CITY-ST-ZIP	
	NAME	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	STREET ADDRESS	5.2 NAME	
	CITY-ST-ZIP	5.3 STREET ADDRESS	
	CITY-ST-ZIP	5.4 CITY-ST-ZIP	
	NAME	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	STREET ADDRESS	6.2 NAME	
	CITY-ST-ZIP	6.3 STREET ADDRESS	
	CITY-ST-ZIP	6.4 CITY-ST-ZIP	

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 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.

SIGNATURE: *[Signature]* **Joseph P. ISERN** **2/15/98 (30) 5920124**

CR2E037 (10/97)