FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #

N07976

(6)

THE 8000 BUILDING CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address								
8000 WEST FLAGLER STREET. SUITE 101 8000 WEST FLAGLER ST MIAMI FL 33144 MIAMI FL 33144-2156			EET. SUITE 101					
						3. Date Incorporated or Qualified 03/06/1985	3a. Date of Last 05/01/1	Report 996
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	<u> </u>	Applied For
21		26				65-0249324		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional Required
City & State 23		City & State	·		······································	6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
, Zip	Country	Zip	L Cou	ntry		8. This corporation has liability for I		rs. 199.032,
24	25 29 30 9. Name and Address of Current Registered Agent		[30]			Florida Statutes Yes No 10. Name and Address of New Registered Agent		
	9. Name and Address of Curre	nt Registered Agent		81	Name	10, Name and Address of New He	pistered Agent	
				١,,	INdille			
	O, OSVALDO, D.D.S.		82 Street Addre			ress (P.O. Box Number is Not Acceptable)		
	EST FLAGLER STREET, SUITE 2	204		83				
MIAMI F	L 33144							
				84	City		FL 85 Z	p Code
11. Pursuant office or r agent. I a	to the provisions of Sections 617.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	02 and 617.1508, Florida Statut e of Florida. Such change was gations of, Section 617.0503, Fl	les, the at authorized orida Stat	cove d by utes.	named corporation	pration submits this statement for the pon's board of directors. I hereby accep	<u> </u>	its registered as registered
SIGNATURE		•						
	Signature typed or printed name of registered ag			i Agen	il signatura require	d when reinstating)	DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		···
TITLE	PD	☐ DELETE	1.1 Tr				L Chang	e [_] Addition
NAME	POZO, JAIME A.		1.2 N					
STREET ADDRESS	8000 W. FLAGLER, #101				ADDRESS			
CHTY-ST-ZIP	MIAMI FL	DELETE		TY-ST	-ZIP		Chang	e Addition
TITLE	SD L. DELETE BAJUELO, OSVALDO		4	2.1 TITLE 2.2 NAME			L Criaily	e
NAME OTOGET ADDDESO	8000 W. FLAGLER, #204				ADDDCCC.			
STREET ADDRESS	MIAMI FL				ADDRESS			
CITY-ST-ZIP	TD	DELETE	3.1 70	ITY - ST	1-212		Chang	e Addition
NAME	POZO, EDUARDO	hand when the	3.2 N/			· ·	4.7	
STREET ADDRESS	8000 W. FLAGLER, #203				ADDRESS			
CITY-ST-ZIP	MIAMI FL		1	ITY-\$1	i			1
TITLE	John Mills I C.	DELETE	4.1 TO				☐ Chang	e Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 \$1	REET /	ADORESS			
CITY - ST - ZIP				TY-ST	1			
TITLE		DELETE	5.1 TI				☐ Chang	e 🔲 Addition
NAME			5 2 N	AME	}			
STREET ADDRESS			5.3 \$1	REET A	address			ı
CITY - ST - ZIP			5.4 Cf	T <u>Y-S</u> T	- ZIP			
THTLE	1	DELETE	6.1 Ti	TLE			Chang	e Addition
NAME			6.2 N	ME				
OTOTET ADDOCTOR				MEET A	LDDDCCC			

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 and ual 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 of 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 changes or on an attachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-97

305-266-)300

FILED

May 13 1997 8:00am

Secretary of State

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