## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT** #

N15827

KENDALL PARK COMMERCIAL CONDOMINIUM TWO ASSOCIAT

Principal Place of Business Mailing Address 13000 SW 120 STREET MIAMI FL 33186 13000 SW 120 STREET MIAMI FL 33186 2. Principal Place of Business 2a. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 28 Country 25 30

Name

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29 9. Name and Address of Current Registered Agent

PERRIN, ROSE 13000 S.W. 120 ST. **MIAMI FL 33186** 

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	07/31/1986				
	4. FEI Number			Applied For	
	59-2776859			Not Applicable	
	5. Certificate of Status Desired	Þ	\$8.75 Additional Fee Required		
	Election Campaign Financing     Trust Fund Contribution			\$5.00 May Be Added to Fees	
	7. Is this nonprofit corporation a	homeowr	ners associ	ation?	
	This corporation owes or has personal Property Tax due Jur		current yea	r Intangible	
_	10. Name and Address of New E	tecleters	d Agent		

**FILED** 

Apr 14 1998 8:00am

Secretary of State

City 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, 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

Street Address (P.O. Box Number is Not Acceptable)

3. Date Incorporated or Qualified

agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.										
SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating)  DATE										
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		S IN 12				
TITLE	PD	DELETE	1.1 TITLE		Change	☐ Addition				
NAME	PEDROSO, GERARDO		1.2 NAME							
STREET ADORESS	12225 SW 132ND CT		1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP							
TITLE	VPD	DELETE	2.1 TITLE		Change	☐ Addition				
NAME	SOLOMON, VIRGINIA		2.2 NAME			Ì				
STREET ADDRESS	12217 SW 132ND CT		2.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL		2. 4 CITY - ST - ZIP		17.5					
TITLE	D	DELETE	3.1 TITLE		Change	☐ Addition				
NAME	PERRIN, ROSE		3.2 NAME							
STREET ADDRESS	1300 SW 120 ST		3.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL.		3.4. CITY-ST-ZIP							
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change	☐ Addition				
NAME	FROYO, RVANKA		4. 2 NAME							
STREET ADDRESS	13000 SW 120 ST		4.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL		4.4 CITY - ST-ZIP							
TITLE		DELETE	5.1 TITLE		Change	☐ Addition				
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET ADORESS							
CITY-ST-ZIP			5.4 CITY-ST-ZIP							
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition				
HAME			6.2 NAME							

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 appendires.

**6.3 STREET ADDRESS** 

SIGNATURE:

STREET ADDRESS