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Mar 16, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

03-16-1999 90157 030 ****70.00

DOCUMENT # N20788

1. Corporation Name

KENDALL PARK COMMERCIAL CONDOMINIUM THREE ASSOCIATION, INC.

Principal Place of Business

13000 SW 120 STREET
 MIAMI FL 33186

Mailing Address

13000 SW 120 STREET
 MIAMI FL 33186



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

05/22/1987

4. FEI Number

65-0008701

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

9. Name and Address of Current Registered Agent

WHITEHOUSE, MARK
 13000 SW 120 STREET
 MIAMI FL 33186

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** DELETE
 NAME **WHITEHOUSE, MARK**
 STREET ADDRESS **13000 SW 120TH STREET**
 CITY-ST-ZIP **MIAMI FL**

TITLE **D** DELETE
 NAME **FROYO, ANTONIO**
 STREET ADDRESS **13000 S.W. 120TH ST**
 CITY-ST-ZIP **MIAMI FL**

TITLE **D** DELETE
 NAME **FROYO, IVANKA**
 STREET ADDRESS **13000 S.W. 120TH ST.**
 CITY-ST-ZIP **MIAMI FL**

TITLE **D** DELETE
 NAME **PERRIN, ROSE**
 STREET ADDRESS **13000 S.W. 120TH ST.**
 CITY-ST-ZIP **MIAMI FL**

TITLE **D** DELETE
 NAME **ALTMAN, BILL**
 STREET ADDRESS **12273 SW 132 CT.**
 CITY-ST-ZIP **MIAMI FL**

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

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, with all other like empowered.

SIGNATURE:

Signature Required

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/99 (805) 233-8887

Date

Daytime Phone #

CR2E037 (11/98)