

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 22 AM 11:08

DOCUMENT # **N30986** (6)

1. Corporation Name
MYSTIC POINTE CONDOMINIUM NO. TWO ASSOCIATION, I NC.

Principal Place of Business 19195 MYSTIC POINT DR 3595 MYSTIC POINTE DR. NORTH MIAMI BEACH FL 33180	Mailing Address 19195 MYSTIC POINT DR 3595 MYSTIC POINTE DR. NORTH MIAMI BEACH FL 33180
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/03/1989	3a. Date of Last Report 03/07/1994
4. FEI Number 65-0176649	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input 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. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

YABLIN, ARNOLD
699 SO. FEDERAL HIGHWAY
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

B1 Name	B2 Street Address (P.O. Box Number is Not Acceptable)	B3	B4 City	B5 FL	B6 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: *Arnold Yablin* **ARNOLD YABLIN** DATE: **2/1/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD TURNER, HAROLD DR. 19195 MYSTIC POINTE DRIVE N. MIAMI BEACH FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HARRIS, GINA DR. 19195 MYSTIC POINTE DRIVE N. MIAMI BEACH FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D HARRIS GINA DR 19195 MYSTIC PT DR NO MIAMI BEACH, FL 33180
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BRADY, HELENE 19195 MYSTIC POINTE DRIVE N. MIAMI BEACH FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD ROTH, IRIS 19195 MYSTIC POINTE DRIVE N. MIAMI BEACH FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FREILE, GUILLERMO 19195 MYSTIC POINTE DRIVE N. MIAMI BEACH FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PASICHOW, MILT 19195 MYSTIC POINTE DRIVE N. MIAMI BEACH FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VD ANN EHRlich 19195 MYSTIC POINTE DRIVE N. MIAMI BEACH, FL 33180

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify 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: *IRIS J. ROTH* **IRIS J. ROTH** DATE: **2-9-95** **305-932-9167**

DOC # N30986

MYSTIC POINTE CONDOMINIUM No Two Assoc. Inc.

PAGE TWO

ADDITION

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ALAN STUTZ

19195 MYSTIC POINTE DRIVE

N. MIAMI BCH, FL 33180