

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N43797 (2)**

1. Corporation Name
MYSTIC POINTE TOWER 600 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**3400 N.E. 192ND STREET
AVENTURA FL 33180**

Mailing Address
**3400 N.E. 192ND STREET
AVENTURA FL 33180**

3. Date Incorporated or Qualified **06/11/1991** 3a. Date of Last Report **03/09/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29

Country
25
Country
30

4. FEI Number **65-0276144** 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**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SIEGFRIED, STEVEN M. (ATTORNEY)
SUITE 1102
201 ALHAMBRA CIRCLE
CORAL GABLES FL 33134**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1505, 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 *Steven M. Siegfried, as Reg Agent* DATE **1/23/96**

12. OFFICERS AND DIRECTORS

TITLE	AVPD	<input type="checkbox"/> DELETE
NAME	LANDAU, MORT	
STREET ADDRESS	3400 NE 192ND ST UNIT 406	
CITY-ST-ZIP	AVENTURA FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	BEKO, JOHN	
STREET ADDRESS	3400 NE 192ND ST., UNIT 402	
CITY-ST-ZIP	AVENTURA FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	SILVERSTEIN, FRED	
STREET ADDRESS	3400 NE 192ND ST., UNIT 612	
CITY-ST-ZIP	AVENTURA FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	TOME, CLAUDIO	
STREET ADDRESS	3400 NE 192ND ST #1208	
CITY-ST-ZIP	AVENTURA FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	BARNETT, STANLEY	
STREET ADDRESS	3400 NE 192ND ST #2008	
CITY-ST-ZIP	AVENTURA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Landau, Mort	
1.3 STREET ADDRESS	3400 N.E. 192nd St., #406	
1.4 CITY-ST-ZIP	Aventura, Fl. 33180	
2.1 TITLE	AVSD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Martel, Martin	
2.3 STREET ADDRESS	3400 N.E. 192nd St., #1112	
2.4 CITY-ST-ZIP	Aventura, Fl. 33180	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 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: *Stanley Barnett Pres* DATE: **1/23/96** DAYTIME PHONE: **932-4165**

CR2E037 (12/95)