FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # N9400001066 (9)

3257/3259 DAY AVENUE CONDOMINIUM ASSOCIATION, IN

C.							
Principal Place	of Business	Mailing Address				- OKU BBIRL DOLOH PARIL	BRITO DITCO BITT FROM
3257/3259 D/ MIAMI FL 331 US		3174 INDIANA STREET Miami FL 33133 US	-				
					3. Date Incorporated or Qualified 03/03/1994		ast Report 3/1995
2. Principal Pl. 21	ace of Business	2a. Mailing Address 26			4. FEI Number APPLIED FOR 65-0	2596968	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Additional ee Required
City & State	3	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be
Zip	Country	Zip	Cou	untry	This corporation has liability for in	···	
24	25	29	30	,		Yes A No	1 6. 100.00E,
	Name and Address of Currer	it Registered Agent			10. Name and Address of New Re	gistered Agent	
				81 Name			
HENDRI)				82 Street Addr	ess (P.O. Box Number is Not Acceptable	<u> </u>	
3174 INDIANA STREET					<u> </u>	·	
Miami Fi	L 33133			63			
				84 City		85	Zip Code
						IFL	•
or register	ed agent, or both, in the State of Florid	da. Such change was authoriz	zed by the (ove-named corpor corporation's boar	ation submits this statement for the purp of of directors. I hereby accept the appoi	ose of changing i ntmerit as registe	its registered office red agent. I am
familiar wi	th, and accept the obligations of, Sect	ion 617.0503, Florida Statutes	S.				
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable (N/	OTL: Pasiclares	d Agent signature required	Author scinatotical	DATE	
12.	OFFICERS AN		13.	Agent signature required	ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
TITLE	PTD	DELETE	1.1 7	ITLE		☐ Chan	
NAME	HENDRIX, BILL	_	1.2 N				• Ц
STREET ADDRESS	3174 INDIANA STREET		1.3 S	TREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			(TY - ST - ZIP			
TITLE	VSD	DELETE	2.1 Ti			Chan	ge 🔲 Addition
NAME	FAHMIC, CATHERINA		2.2 N	AME			
STREET ADDRESS	1739 N. VENETION WAY		2.3 \$	TREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		2.40	CITY-ST-ZIP			
TITLE	D	DELETE	3.1 TI	ITLE		Chan	ge 🔲 Addition
NAME	CASTILLO, TERESA		3.2 N	AME			
STREET ADDRESS	3174 INDIANA STREET		3.3 \$	TREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		3.4. 0	HTY-ST-ZIP			
TITLE		DELETE	4.1 TI	ITLE		Chan	ge 🔲 Addition
NAME			4. 2 N	IAME			
STREET ADDRESS				TREET ADORESS			
CITY-ST-ZIP		□DELETE		ITY-ST-ZIP	·	<u> </u>	
TITLE		Doctric	5.1 TI			Chang	ge
NAME CTREET ADDRESS			, 5.2 N/	1			
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	54 C	ITY-ST-ZIP		[] Chan	ge Addition
NAME		Попп	62 N			ب ماهار	An Tayongood
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP				ITY-ST-ZIP			
	y certify that the information supplied	with this filing is voluntarily furn			or the exemption stated in Section 119.0	7(3)(k), Florida St	atutes. I further
certify that oath; that	the information indicated on this annu	ial report or supplemental ann ration or the receiver or truste on an attachment with an addi	iual report i se empower	is true and accurat	te and that my signature shall have the sis s report as required by Chapter 617, Flor	ame logal effect a	is if made under

SIGNATURE:

3/15/96 (3W) 377-4445