

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

FILED
96 MAY 10 PM 3:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000002405 (8)
1. Corporation Name

COCO IBIZA VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

3099 OAK AVE
MIAMI FL 33133

3099 OAK AVE
MIAMI FL 33133

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
05/12/1994

3a. Date of Last Report
08/10/1995

4. FEI Number

APPLIED FOR

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

10. Name and Address of New Registered Agent

DODER, ROBERT
20 N.W. 181 ST.
MIAMI FL 33169

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 director, if applicable

NOTE: Registered Agent signature required when translating

DATE

12. OFFICERS AND DIRECTORS

TITLE

DV

☐ DELETE

NAME

MATHIEU, JOSEPH JR

STREET ADDRESS

3099 OAK AVE

CITY - ST - ZIP

MIAMI FL 33133

TITLE

DPST

☐ DELETE

NAME

CHABLI, ADI

STREET ADDRESS

3099 OAK AVE

CITY - ST - ZIP

MIAMI FL 33133

TITLE

D

☐ DELETE

NAME

GELL, DAVID

STREET ADDRESS

3099 OAK AVE

CITY - ST - ZIP

MIAMI FL 33133

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

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 in an attachment with an address

SIGNATURE:

ADI CHABLI, PRESIDENT

04-23-96 (305) 443 1801

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone #

CR2E037 (12/95)