## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

N94000004942 (8) **DOCUMENT #** 

OCTAGON TOWERS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address % THE CONTINENTAL GROUP 1881 WASHINGTON AVENUE 20815 NE 16TH AVENUE B-14 MIAMI BEACH FL 33139 NORTH MIAMI BEACH FL 33179-2138 3. Date incorporated or Qualified 3a. Date of Last Report 10/07/1994 02/28/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0560049 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zıp Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Country Yes No 30 Florida Statutes 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ER & POLLIAKOFF, P.A.
dress (P.O. Box Number Is Not Acceptable)
BLUE LAGOON DR., SUITE 100 BECKER & FELLUS CORPORATION 82 1881 WASHINGTON AVENUE 83 ATTM: SAMUEL FELLAS H. ROGEL MIAMI BEACH FL 33189 84 33126 11. Pursuant to the previsions of office or regulared a yent, or similar with, and Sections 67,0102 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both with State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered by the obligations of, Section 617,0503, Florida Statutes. 29 **SIGNATUR** gent and trie if applicable (NOTE: Registered Agent signature required when reinstating) Sign AND DIRECTORS IN 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFF 12. 13. Change Addition DELETE TITI F PD 1.1 TITLE KRISTEN BLUME FELLUS, SAMUEL 12 NAME NAME 1881 WASHINGTON AVE., UNIT 10C **1881 WASHINGTON AVENUE** 1.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH, FL 33139 MIAMI BEACH FL 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE ROUSSEAU, DANIEL JEFFREY THRASHER 2.2 NAME NAME **1881 WASHINGTON AVENUE** STREET ADDRESS 2.3 STREET ADDRESS 1881 WASHINGTON AVE., UNIT 16D MIAMI BEACH FL 2.4 CITY-ST-ZIP <u>MIAMI BEACH, FL 33139</u> CITY - ST - ZIP Change Addition DELETE 3.1 TITLE TITLE THRASHER, JEFFREY BOB WUEST 3.2 NAME NAME 1881 WASHINGTON AVE., UNIT 7A **1881 WASHINGTON AVENUE** 3.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL MIAMI BRACH, FL 33139 3.4. CITY-ST-ZIP CITY-ST-ZIP Change X Addition DELETE 4.1 TITLE TITLE 4.2 NAME ALLEN MORLOCK NAME 4.3 STREET ADDRESS 1881 WASHINGTON AVE., UNIT 3H STREET ADDRESS MIAMI BRACH, FL 33139 ABST.TD 4.4 CITY-ST-ZIP CITY-ST-ZIP Change X Addition DELETE 5.1 TITLE TITLE

6.4 CITY-ST-ZIP 14. I do 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.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

5.4 CITY-ST-ZIP

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

FL

33139

LUISA MOSQUERA

MIAMI BEACH,

1881 WASHINGTON AVE.,

<u>MIAMI BEACH, FL 33139</u>

1881 WASHINGTON AVE.,

MICHAEL ABRAMOWITZ

Daytime Phone # 0033331

UNIT 11H

UNIT 14H

Change

**FILED** 

Feb 17 1997 8:00am

Secretary of State