


FILED
May 03, 1999 8:00 am
Secretary of State

05-03-1999 90123 010 ***122.50

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000005486 ✓
 7. Corporation Name
POINT LAKE CONDOMINIUM ASSOCIATION THREE, INC.

577373 - 90010 - 42



Principal Place of Business P.O. BOX 831235 MIAMI FL 33823 US	Mailing Address P.O. BOX 831235 MIAMI FL 33283 US
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21. Principal Place of Business	2a. Mailing Address	3. Date incorporated or Qualified 11/04/1994
22. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 65-0525342
23. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24. Zip	29. Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent TRIAY, CARLOS 999 PONCE DE LEON SUITE 1110 CORAL GABLES FL 33134	10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code
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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 _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE FERNANDEZ, ANTONIO 15355 SW 76TH TERR, #102 MIAMI FL 33193	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VPD	<input type="checkbox"/> DELETE FERNANDEZ, ANTONIO 15355 SW 76TH TR #102 MIAMI FL	2.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE TD	<input type="checkbox"/> DELETE DE LA CRUZ, MANUEL 15385 SW 76TH TERR #105 MIAMI FL	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE V	<input type="checkbox"/> DELETE VILA, MARIA 15390 SW 76TH TERR, #102 MIAMI FL 33193	4.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE TD	<input type="checkbox"/> DELETE DE LA CRUZ, MANUEL 15385 SW 76TH TERR, #105 MIAMI FL 33193	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I 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, with all other like empowered.

SIGNATURE: ANTONIO FERNANDEZ **SIGNATURE REQUIRED** Date: 4-26-99
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E037 (1/98)