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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N95000001213

1. Corporation Name

ASSOCIATION FRANCO-FLORIDIENNE, INC.

203697-90105-27

Principal Place of Business

ONE BISCAYNE TOWER, SUITE 1710 2 SOUTH BISCAYNE BLVD. MIAMI FL 33131

Mailing Address

ONE BISCAYNE TOWER, SUITE 1710 2 SOUTH BISCAYNE BLVD. MIAMI FL 33131



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

03/14/1995

4. FEI Number

65-0580184

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

9. Name and Address of Current Registered Agent

ELEDSTEIN, STEVEN A 1200 AVNASTASIA AVE., STE 300 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

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPD - SOURCEAU, ELIZABETH DELETED STREET ADDRESS 300 ARAGON AVE., SUITE 206 CITY-ST-ZIP CORAL GABLES FL 33134

TITLE VSD EDDELSTEIN, STEVE DELETED STREET ADDRESS 1200 ANASTASIA AVE., STE. 300 CITY-ST-ZIP CORAL GABLES FL 33134

TITLE PD ELLISON, DAVID DELETED STREET ADDRESS P.O. BOX 248093, ASHE BLDG., RM. 521 CITY-ST-ZIP CORAL GABLES FL 33124-4650

TITLE TD FAZILLEAU, ERIC DELETED STREET ADDRESS C/O CONSTRUCTA SU, 2665 SO BAYSHORE DR STE CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE DELETED STREET ADDRESS CITY-ST-ZIP

TITLE DELETED STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

Signature and typed or printed name of signing officer or director

21 JANUARY 99 (305)444-5660

Date

Daytime Phone #

CR2E037 (11/98)