

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$1,250.00 DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25)

FILED
 Jul 08 1998 8:00am
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000001217 (6)
 1. Corporation Name
A TOUCH OF GLASS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 635 WEST 68TH ST HIALEAH FL 33014 US	Mailing Address 635 WEST 68TH ST. HIALEAH FL 33014 US
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3. Date Incorporated or Qualified 03/04/1996
4. FEI Number 65-0713928
Applied For <input type="checkbox"/>
Not Applicable <input type="checkbox"/>

21. Principal Place of Business 633 WEST 68 ST	2a. Mailing Address 633 W 68 ST
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State HIALEAH FL	28. City & State HIALEAH FL
24. Zip 33014	25. Country USA
29. Zip	30. Country USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GONZALEZ, JAMES 635 WEST 68TH ST. HIALEAH FL 33014	
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10. Name and Address of New Registered Agent	
81 Name SAME	82 Street Address (P.O. Box Number is Not Acceptable) 633 W 68 ST
83	84 City HIALEAH
85 Zip Code 33014	

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: JAMES GONZALEZ DATE: 7-1-98

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME GONZALEZ, JAMES	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 635 WEST 68TH ST	CITY-ST-ZIP HIALEAH FL	1.2 NAME	
		1.3 STREET ADDRESS	
		1.4 CITY-ST-ZIP	
TITLE TD	NAME CARRANZA, RICARDO J	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 627 WEST 68TH ST	CITY-ST-ZIP HIALEAH FL	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
TITLE SD	NAME GONZALEZ, MIGDALIA	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 635 WEST 68TH ST	CITY-ST-ZIP HIALEAH FL	3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	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.

SIGNATURE: JAMES GONZALEZ DATE: 7-1-98 DAYTIME PHONE #: 305 824-8644

CR2E037 (5/98)