

FILE NOW: FILING FEE IS \$01.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED Jul 29 1998 8:00am Secretary of State

DOCUMENT # 1. Corporation Name N96000002029 Euclid East Condominium Association, Inc.

Principal Place of Business 1545 Euclid Ave. Miami Beach, Fl. 33139 Mailing Address c/o Global Investment Properties 306 Alcazar Ave. Suite 303 Coral Gables, Fl. 33134

3. Date Incorporated or Qualified 4. FEI Number 59-1212469 Applied For Not Applicable

2. Principal Place of Business 21 1545 Euclid Ave. 22 City & State 23 Miami Beach, Florida 24 Zip 33139 25 Country USA 2a. Mailing Address 26 306 Alcazar Ave. Suite 303 27 City & State 28 Coral Gables, Florida 29 Zip 33134 30 Country USA

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

9. Name and Address of Current Registered Agent Bortnick, Michael 1545 Euclid Avenue, Apt #6-K. Miami Beach, Florida 33139 US

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 FL

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 1.1 TITLE Director 1.2 NAME Lisa Clifford 1.3 STREET ADDRESS 1545 Euclid Ave. #2-E 1.4 CITY-ST-ZIP Miami Beach, Fl. 33139 2.1 TITLE President 2.2 NAME Marcelo Penengo 2.3 STREET ADDRESS 1545 Euclid Ave. #3-K 2.4 CITY-ST-ZIP Miami Beach, Fl. 33139 3.1 TITLE Vice President 3.2 NAME David Hanshaw 3.3 STREET ADDRESS 1545 Euclid Ave. #6-F 3.4 CITY-ST-ZIP Miami Beach, Fl. 33139 4.1 TITLE Treasurer 4.2 NAME Michael Bortnick 4.3 STREET ADDRESS 1545 Euclid Ave. #6-K 4.4 CITY-ST-ZIP Miami Beach, Fl. 33139 5.1 TITLE Director 5.2 NAME Claudio Gonzalez 5.3 STREET ADDRESS 1545 Euclid Ave. #2-F 5.4 CITY-ST-ZIP Miami Beach, Fl. 33139 6.1 TITLE Director 6.2 NAME Paulo MacCormick 6.3 STREET ADDRESS 1545 Euclid Ave. #5-G 6.4 CITY-ST-ZIP Miami Beach, Fl. 33139

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE Director 1.2 NAME Michael Pittman 1.3 STREET ADDRESS 1545 Euclid Ave. #6-L 1.4 CITY-ST-ZIP Miami Beach, Fl. 33139 2.1 TITLE Secretary 2.2 NAME Pedro Couzo 2.3 STREET ADDRESS 1545 Euclid Ave. #6-B 2.4 CITY-ST-ZIP Miami Beach, Fl. 33139 3.1 TITLE Director 3.2 NAME Joen L. Hilfer 3.3 STREET ADDRESS 1545 Euclid Ave. #6-A 3.4 CITY-ST-ZIP Miami Beach, Fl. 33139 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 70000260716 5.3 STREET ADDRESS -08/04/98--01072--021 5.4 CITY-ST-ZIP \*\*\*61.25 6.1 TITLE 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: Marcelo Penengo, President 6/18/98 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/97)