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Jun 22 1998 8:00am
Secretary of State

NON-PROFIT
CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT #N97000000942

NON-PROFIT

AMENDMENT

1. Corporation Name

REX SOUTH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1925 Brickell Ave. Suite D206 Miami FL 33129	1925 Brickell Ave. Suite D206 Miami FL 33129

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: 2-17-97

4. FEI Number: 650821636 — [X] 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

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	10. Name and Address of New Registered Agent
ROGER BESU ESQ 1925 Brickell Ave., Suite D206 Miami FL 33129	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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	[ ] Change [ ] Addition
NAME	LUIS O. ROVER	1.2 NAME	
STREET ADDRESS	9737 NW 41 St. Ste 343	1.3 STREET ADDRESS	
CITY-ST-ZIP	Miami FL 33178	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	[ ] Change [ ] Addition
NAME	DANIEL H. MIZRAJI	2.2 NAME	
STREET ADDRESS	9737 NW 41 St. Ste 343	2.3 STREET ADDRESS	
CITY-ST-ZIP	Miami FL 33178	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	[ ] Change [ ] Addition
NAME	ALBERTO ALVAREZ	3.2 NAME	
STREET ADDRESS	9737 NW 41 St., Ste 343	3.3 STREET ADDRESS	
CITY-ST-ZIP	Miami FL 33178	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	[ ] Change [ ] Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	[ ] Change [ ] Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	[ ] Change [ ] Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

[ ] DELETE

FLORIDA PROFIT
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***61.25

JV 6.22

CR2E034 (10/97)

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Luis O Rover 4-23-98 (305) 854-8363