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FILED

Feb 26 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000018384 (3)

1. Corporation Name  
CONDOEYE, INC.



Principal Place of Business  
1001 IVES DAIRY ROAD STE 204  
MIAMI FL 33179

Mailing Address  
1001 IVES DAIRY ROAD STE 204  
MIAMI FL 33179-2501

3. Date Incorporated or Qualified 02/28/1996  
3a. Date of Last Report N/A

2. Principal Place of Business

21 2501 S. OCEAN DR.

Suite, Apt. #, etc.

22 #938

23 Hollywood, FL.

Zip

24 33019

Country

25 BROWARD

2a. Mailing Address

26 2501 S. OCEAN DR.

Suite, Apt. #, etc.

27 #938

28 Hollywood, FL.

Zip

29 33019

Country

30 BROWARD

4. FEI Number

65-0642522

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

BRIZEL, ROBERT  
1001 IVES DAIRY ROAD STE 204  
MIAMI FL 33179

10. Name and Address of New Registered Agent

81 Name

Sherry Holop

82 Street Address (P.O. Box Number is Not Acceptable)

2501 S. OCEAN DR.

83

#938

84 City

Hollywood

FL

85 Zip Code

33019

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

Sherry Holop

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/19/97

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME AVRACH, IRIS  
STREET ADDRESS 1001 IVES DAIRY ROAD STE 204  
CITY-ST-ZIP MIAMI FL 33179

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
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CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P  
1.2 NAME Sherry Holop  
1.3 STREET ADDRESS 2501 S. OCEAN DR #938  
1.4 CITY-ST-ZIP Hollywood, FL. 33019

☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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: Sherry Holop  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
DATE 2/19/97  
DAYTIME PHONE # 454-929-0881

CR2E034 (9/96)