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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V17496

(3)

MR. CONDOMINIUM OF FLORIDA, INC.

FILED
May 13 1997 8:00am
Secretary of State



Zip Country Zip Country Zip Country Zip Country S. This corporation has liability for intentible tax under s. ft Florida Statutes The Country Zip Zi	SUITE 204 JUPITER FL 33- US 2. Principal Pl 21 Suite, Apt 22	I.S. HIGHWAY ≱1 477 lace of Business #, etc.	Mailing Address 4900 SOUTH U.S. HIGHWAY #1 SUITE 204 JUPITER FL 33477-1125 US 28. Mailing Address 26 Suite, Apt #, etc.			3. Date Incorporated or Qualified 02/27/1992 06/04/1996 4. FEI Number Applied For Not Applicate 5. Certificate of Status Desired \$8.75 Additional Fee Required			
UZZI, RENA 4300 S. U.S. HIGHWAY #1 SUITE 204 JUPITER FL 33477 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits his statement for the purpose of changing its 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 reagrent, I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 16. In the state of Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 16. In the state of Florida Statutes. 16. In the state of Florida Statutes. 16. In the state of Florida Statutes. 17. In the state of Florida Statutes. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 19. ADDITIONS/CHANGES TO OFFICERS AND OFFICERS 19. ADDITIONS/CHANGES TO OFFICERS AND OFFICERS 19. ADDITIONS/CHANGES TO OFFICERS AND OFFICERS 19. ADDITIONS/CHANGES TO OFFICERS 19. ADDITIONS/	23 Zip		28 Zip		intry		Trust Fund Contribution 8. This corporation has liability for	Adde	ed to Fees
UZZI, RENA 4300 S. U.S. HIGHWAY ≠1 SUITE 204 JUPITER FL 33477 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 roftice 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 reagrent. I am familiar with or high and accept the Obligations of, Section 607.0506, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as reagrent. I am familiar with an and accept the Obligations of, Section 607.0506, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as reagrent. I am familiar with an and accept the Obligations of, Section 607.0506, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as reagrent. I am familiar with an and accept the Obligations of, Section 607.0506, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as reagrent. I as reagrent as reagre	24			30					
11. Pursuant to the provisions of Sections 607 6502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its or office or registered agent, no both, in the State of Florida Statutes, such change was authorized by the corporation's board of directors. I hereby accept the appointment as reliable to the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment as reliable to the purpose of change its or agent. I am familiar with, and accept the objections of, Section 607.6505, Florida Statutes. SIGNATURE Signature PST	4300 SUIT	1, RENA 0 S. U.S. HIGHWAY # 1 1E 204	nt registered Agent		82 83	Street Addre		ble)	Tip Code
DELETE	SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NO	TE: Registered			ed when reinstating)	DATE	
THE V	THE NAME STREET ADDRESS	PST UZZI, RENA 4300 S. U.S. HIGHWAY #1, 8	DELETE	1.1 Til 1.2 N/ 1.3 ST	AME TREET .				
DELETE 3.1 TITLE 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP Change	TITLE NAME STREEL ADDRESS	V Uzzie, raymond B 4300 S. U.S. Highway #1, S		2.2 N/ 2.3 ST	AME Treet			☐ Chang	ge Addition
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	TITLE NAME STREET ADDRESS		☐ DELETE	6.1 T/ 6.2 N/ 6.3 S1	TLE AME TREET	ADDRESS		Chang	ge 🔲 Addition

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.