


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90106 031 ****61.25

DOCUMENT # 707621 1. Entity Name THE SHORES CONDOMINIUM, INC.					
Principal Place of Business 1700 NORTHEAST 105TH STREET MIAMI, FL 33138			Mailing Address 1700 NORTHEAST 105TH STREET MIAMI, FL 33138		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1095398	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
GANGUZZA, JOSEPH H 1 S.E. 3RD AVE., SUITE 2150 MIAMI, FL 33131				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME
	S	KORMAN, NINA	1700 NE 105 ST #316 MIAMI, FL 33138	<input type="checkbox"/> Delete	Pres
	D	RODRIGUEZ, JORGE	1700 NE 105 STREET #512 MIAMI, FL 33138	<input type="checkbox"/> Delete	Do, Richard
	D	GAMAYO, JOSUE	1700 NE 105 ST #406 MIAMI SHORES, FL 33138	<input checked="" type="checkbox"/> Delete	1700 NE 105 ST #403 miami FL 33138
	T	LUCERIA, PATON	1700 NE 105 ST #113 MIAMI SHORES, FL 33138	<input type="checkbox"/> Delete	Director
				<input type="checkbox"/> Change	Marquez, Esther
				<input type="checkbox"/> Change	1700 NE 105 ST #417 miami FL 33138
				<input type="checkbox"/> Change	
				<input type="checkbox"/> Change	
				<input type="checkbox"/> Change	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Lucretia S. Paton</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date: <i>Apr. 23, 2008</i> Daytime Phone #: <i>305-893-0741</i>					