## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#712580** 

Entity Name: 252 JEFFERSON CONDOMINIUM, INC.

FILED Apr 30, 2004 Secretary of State

y .tu	202 02,1					
Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:  252 JEFFERSON AVE APT 3 MIAMI BCH, FL 33139  New Mailing Address:		
	RSON AVE AI H, FL 33139	PT 4	252 JEFF MIAMI BC			
Current M	ailing Addres	s:	New Mail			
252 JEFFERSON AVE APT 4 MIAMI BCH, FL 33139			207	918 OCEAN DRIVE 207 MIAMI BCH, FL 33139		
FEI Number:	59-1235171	FEI Number Applied For ( )	FEI Number Not App	olicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
918 OCEA #207 MIAMI, FL The above	33139 US	submits this statement for the po	urpose of changing	its registered	d office or registered agent, or both	,
SIGNATUR	RE:					
	Electron	ic Signature of Registered Age	nt		Date	
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PD () TAMCSIN, ROB 252 JEFFERSO MIAMI BEACH,	N AVE. #3	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPD () DE FREITAS, G 252 JEFFERSO MIAMI, FL 3313	N AVENUE #7	Title: Name: Address: City-St-Zip:	252 JEFFEF	(X) Change ( ) Addition N, CHRISTIAN RSON AVENUE #5 33139	
Title: Name: Address: City-St-Zip:	STD () GOMEZ, LUISA 252 JEFFERSC MIAMI, FL 3313		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPD (X) MIKKELSEN, CI 252 JEFFERSC MIAMI BEACH,	N AVE. #5	Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT TAMCSIN PD 04/30/2004