


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

1082

|  |   |
|--|---|
| DOCUMENT # 712954                              |  |
| 1. Entity Name<br>JADE WINDS ASSOCIATION, INC. |   |

FILED.

07 FEB -8 AM 11:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

|   |  |
|---|--|
| Principal Place of Business<br>1720 N E 191 STREET<br>NORTH MIAMI BEACH, FL 33179 | Mailing Address<br>1720 N E 191 STREET<br>NORTH MIAMI BEACH, FL 33179 US |
|---|--|




|                                |                     |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 3. Mailing Address  |
| Suite, Apt. #, etc.            | Suite, Apt. #, etc. |
| City & State                   | City & State        |
| Zip                            | Country             |

03272006 Chg-NP CR2E037 (11/05) 07

|  |
|--|
| 6. Name and Address of Current Registered Agent<br><del>ROGEL, DAVID</del><br>5201 BLUE LAGOON DR<br>SUITE #100<br>MIAMI, FL 33126 |
|--|

|                                  |  |
|----------------------------------|--|
| 4. FEI Number<br>59-1220918      | Applied For<br>Not Applicable                                      |
| 5. Certificate of Status Desired | <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |

|   |   |
|---|---|
| 7. Name and Address of New Registered Agent<br>Name<br>MICHAEL HYMAN<br>HYMAN, SPECTOR & MARS, LLP<br>MUSEUM TOWER, 27 <sup>TH</sup> FL<br>150 WEST FLAGLER STREET<br>MIAMI, FL 33130 | 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.<br><br>SIGNATURE |
|---|---|

300088061449  
02/13/07--01001--007 \*\*\$1.25

|   |   |                                |  |
|---|---|--------------------------------|--|
| Filing Fee is \$61.25<br>Due by May 1, 2006 | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be<br>Added to Fees | Make check payable to<br>Florida Department of State |
|---|---|--------------------------------|--|

| 10. OFFICERS AND DIRECTORS                     |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <del>WRO</del><br>WEIZ, TIGOR<br>1670 NE 191 STREET #403<br>N. MIAMI BCH., FL 33179 <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <del>LE</del><br>LEFKOWITZ, LISA<br>1710 NE 191ST ST #302<br>N MIAMI BCH, FL 33179 <input type="checkbox"/> Delete             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <del>TD</del><br>MARGARIL, RUTH<br>1780 NE 191ST<br>MIAMI, FL 33179 <input checked="" type="checkbox"/> Delete                 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <del>PD</del><br>BERGMAN, IZAK<br>1750 NE 191ST #300<br>N. MIAMI BCH, FL 33179 <input checked="" type="checkbox"/> Delete      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <del>VP</del><br>AGIN, LARRY<br>1770 NE 191ST #712<br>MIAMI, FL 33179 <input checked="" type="checkbox"/> Delete               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |  |
|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><del>Tibor Weiss</del><br>1670 NE 191ST #403<br>N. Miami Bch, FL 33179                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>Robert L. Libman<br>1780 NE 191 ST #506<br>N. Miami Bch, FL 33179 President        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>VP<br>Jeffrey Modakhat<br>1750 NE 191ST #121<br>N. Miami Bch, FL 33179 V.P.        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>ANINA Venzel<br>1780 NE 191ST #105<br>N. Miami Bch, FL 33179 V.P.                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>C.S.<br>Kristen Vetter<br>1780 NE 191ST #614<br>N. Miami Bch, FL 33179 Secretary   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>T<br>Sandra Fox Moselson<br>1680 NE 191ST #215<br>N. Miami Bch, FL 33179 Treasurer |

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:  President 3/29/06 | Date | Daytime Phone # |
|---|------|-----------------|

Zof



1720 NORTHEAST 191<sup>ST</sup> STREET  
NORTH MIAMI BEACH,  
FLORIDA 33179  
TELEPHONE: 305-949-4816  
FAX: 305-949-5950

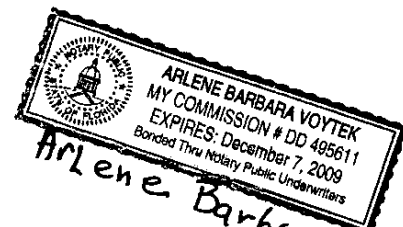
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Please correct our Annual Report as follows:

|                                |   |
|--------------------------------|---|
| President                      | Robert Libman ✓<br>1780 NE 191 <sup>ST</sup> Street #506<br>North Miami Beach, FL 33179       |
| 1 <sup>ST</sup> Vice President | Jeffrey Moolevliet ✓<br>1750 NE 191 <sup>ST</sup> Street #121<br>North Miami Beach, FL 33179  |
| 2 <sup>ND</sup> Vice President | Babak Naserzare<br>1780 NE 191 <sup>ST</sup> Street #704<br>North Miami Beach, FL 33179       |
| Corporate Secretary            | Kirsten Vetter ✓<br>1780 NE 191 <sup>ST</sup> Street #614<br>North Miami Beach, FL 33179      |
| Treasurer                      | Sandra Fox Mosenson ✓<br>1680 NE 191 <sup>ST</sup> Street #215<br>North Miami Beach, FL 33179 |

Current Registered Agent is: Michael Hyman  
150 West Flagler Street  
27<sup>TH</sup> Floor – Museum Tower  
Miami, FL 33130

Signature: Arlene Barbara Voytek  
Notary: 12-7-2009  
Date: 1/31/07



Arlene Barbara Voytek