2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State
02-27-2006 90097 023 ****61.25

DOCUMENT # 713047

1. Entity Name

WASHINGTON CENTER CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
524 WASHINGTON AVE SUITE 100 MIAMI BEACH FL 33139 US	C/O CAM MANG. SRVS. PO BOX 5103 HIALEAH FL 33014-1103 US

1st MOORE CR2E037 (10/05)

2. Principal Place of Business	3. Mailing Address
524 Washington Ave.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami Beach, FL. 33139	City & State
Zip: 33139 Country: USA	Zip Country

4. FEI Number: 59-1259698 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GONZALEZ, ANITA CAM MANG. SERV. 1800 WEST 49 ST., #330 HIALEAH FL 33012	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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: Anita Gonzalez 02/01/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	P DORTICOS, OSUALDO 524 WASHINGTON AVENUE, APT. 207 MIAMI BEACH FL 33139	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Henry Suarez 524 Washington Ave. #309 Miami Beach, FL. 33139	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ELIZONDO, EDUARDO 524 WASHINGTON AVENUE, APT. 101 MIAMI BEACH FL 33139	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D Evelio Nazco 524 Washington Ave. #206 Miami Beach, FL. 33139	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD NAZCO, EVELIO 524 WASHINGTON AV A206 MIAMI BEACH FL 33139	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Jose Reyes 524 Washington Ave. #307 Miami Beach, FL. 33139	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VINCENZ, AMADDEO 524 WASHINGTON AVE., #311 MIAMI BEACH FL 33139	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Osvaldo Dorticos 524 Washington Ave. #213 Miami Beach, Fl. 33139	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SUAREZ, HENRY 524 WASHINGTON AVENUE, #309 MIAMI BEACH FL 33139	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Eduardo Elizondo 524 Washington Ave. #101 Miami Beach, FL. 33139	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Henry Suarez 2/14/06 305-826-9191
TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone