


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

FILED
Feb 02, 2007 8:00 am
Secretary of State

02-02-2007 90009 034 ****61.25

DOCUMENT # 714905	
1. Entity Name 915 BUILDING, INC.	

Principal Place of Business 915 JEFFERSON AVE. MIAMI BEACH FL 33139	Mailing Address 915 JEFFERSON AVE. MIAMI BEACH FL 33139
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/05)

City & State	City & State	4. FEI Number NO-T APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
PRIETO, GERARDO C. 915 JEFFERSON AVE. #3-A MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
State: 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 _____ DATE _____
Signature: typed or printed name of registered agent and title of association. (NOTE: Registered Agent signature required when registering)

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

9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE: POT	<input type="checkbox"/> Delete
NAME: PRIETO, GERARDO C.	
STREET ADDRESS: 915 JEFFERSON AVE.	
CITY-ST-ZIP: MIAMI BEACH FL	
TITLE: VDT	<input type="checkbox"/> Delete
NAME: MARTINEZ, BERTHA A	
STREET ADDRESS: 915 JEFFERSON AVE.	
CITY-ST-ZIP: MIAMI BEACH FL	
TITLE: SD	<input type="checkbox"/> Delete
NAME: RITCHIE, MARK	
STREET ADDRESS: 915 JEFFERSON AVE #4-D	
CITY-ST-ZIP: MIAMI BEACH FL	
TITLE: D	<input type="checkbox"/> Delete
NAME: KAUFMAN, HANK	
STREET ADDRESS: 915 JEFFERSON AVE	
CITY-ST-ZIP: MIAMI BCH FL	
TITLE: D	<input type="checkbox"/> Delete
NAME: CALDERON, FRANK	
STREET ADDRESS: 915 JEFFERSON AVE #4-A	
CITY-ST-ZIP: MIAMI BCH FL	
TITLE: D	<input type="checkbox"/> Delete
NAME: FINNK, STEVEN D	
STREET ADDRESS: 915 JEFFERSON AVE 4-F	
CITY-ST-ZIP: MIAMI BEACH FL 33139	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: ADRIEL ARRIAGA	
STREET ADDRESS: 915 JEFFERSON AVE 3-B	
CITY-ST-ZIP: MIAMI BEACH	
TITLE: D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: MARTINEZ, BERTHA A	
STREET ADDRESS: 915 JEFFERSON AVE	
CITY-ST-ZIP: MIAMI BEACH FL	
TITLE: D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: KAUFMAN, HANK	
STREET ADDRESS: 915 JEFFERSON AVE	
CITY-ST-ZIP: MIAMI BCH FL	
TITLE: D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: CALDERON, FRANK	
STREET ADDRESS: 915 JEFFERSON AVE #4-A	
CITY-ST-ZIP: MIAMI BCH FL	
TITLE: D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: FINNK, STEVEN D	
STREET ADDRESS: 915 JEFFERSON AVE 4-F	
CITY-ST-ZIP: MIAMI BEACH FL 33139	

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: Gerardo C Prieto 1/25/07 (305) 673-1345
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR