FILED

## 2004 NOT-FOR-PROFIT\_CORPORATION ANNUAL REPORT (AR)

## Apr 12, 2004 8:00 am Secretary of State **DOCUMENT # 719928** 1. Entity Name 04-12-2004 90657 016 \*\*\*\*61.25 PLAZA DEL PRADO CONDOMINIUM ASSOCIATION. INC. Principal Place of Business Mailing Address 18071 BISCAYNE BLD 18071 BISCAYNE BOULEVARD J4U31885 N MIAMI BEACH FLA 33160 **AVENTURA FL 33160** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) MOORE City & State City & State 4. FEI Number Applied For 59-1349416 Not Applicable 7in Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HYMAN, MICHAEL L Street Address (P.O. Box Number is Not Acceptable) 150 W FLAGLER ST 27TH FLOOR **MIAMI FL 33130** 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. ☐ Delete TITLE TITLE ☐ Change ☐ Addition SANDLER, ALVIN NAME NAME 18041 BISCAYNE BLVD # 1005 STREET ADDRESS STREET ADDRESS AVENTURA FL 33160 CITY-ST-ZIP CITY-ST-ZIP Change M Delete TITLE AT Addition Ann Marie Cheramie DELUCA, RONNIE 18081 Biscayne Blvd. #405 18081 BISCAYNE BLVD PH2 STREET ADDRESS STREET ADDRESS Aventura, Fla. 33160 AVENTURA FL 33160 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition BROWN,-SAM -- ---NAME NAME 18081 BISCAYNE BLVD #804 STREET ADDRESS STREET ADDRESS AVENTURA FL 33160 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE TOBIN, REUBIN NAME NAME 18031 BISCAYNE BLVD #1102 STREET ADDRESS STREET ADDRESS **AVENTURA FL 33160** CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE PROJAN, MILTON NAME NAME 18041 BISCAYNE BLVD # 1501 STREET ADDRESS STREET ADDRESS **AVENTURA FL 33160** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. If hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If 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:

Down\_ PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/04 305-93/-5643
Dayline Phone #