

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 18, 2004 8:00 am**  
**Secretary of State**

02-18-2004 90014 023 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                |                                                                                    |                                                                                                                                                                                                                             |                                                                                   |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--|
| <b>DOCUMENT # 723466</b><br>1. Entity Name<br><b>BONA VISTA CONDOMINIUM ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                |                                                                                    |                                                                                                                                                                                                                             |  |  |
| Principal Place of Business<br><b>3375 N COUNTRY CLUB DR<br/>MIAMI, FL 33180</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                |                                                                                    | Mailing Address<br><b>2035 HARDING STREET<br/>HOLLYWOOD, FL 33020</b>                                                                                                                                                       |                                                                                   |  |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                |                                                                                    | 3. Mailing Address<br><b>1840 NE 153 ST</b>                                                                                                                                                                                 |                                                                                   |  |
| City & State<br><b>NO. MIAMI BCH, FL.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                |                                                                                    | 4. FEI Number<br><b>13-2753711</b>                                                                                                                                                                                          |                                                                                   |  |
| Zip<br><b>33162</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                |                                                                                    | Country<br><b>DADE</b>                                                                                                                                                                                                      |                                                                                   |  |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                |                                                                                    | <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                       |                                                                                   |  |
| 6. Name and Address of Current Registered Agent<br><b>MEYROWITZ, ANDREW<br/>C/O DCI<br/>2035 HARDING STREET STE 200<br/>HOLLYWOOD, FL 33020</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                |                                                                                    | 7. Name and Address of New Registered Agent<br>Name <b>ROBERTS MANAGEMENT</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>1840 NE 153 ST.</b><br>City <b>NO. MIAMI Bch.</b> <b>FL</b> Zip Code <b>33162</b> |                                                                                   |  |
| 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 <i>Hyman Brodsky</i> <i>2/9/04</i><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE</small>                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                |                                                                                    |                                                                                                                                                                                                                             |                                                                                   |  |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2004</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                | 9. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> |                                                                                                                                                                                                                             | <b>\$5.00 May Be Added to Fees</b>                                                |  |
| <b>Make check payable to<br/>Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                |                                                                                    |                                                                                                                                                                                                                             |                                                                                   |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                |                                                                                    | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                                                                                                                |                                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>T</b><br><b>BRODSKY, HYMAN</b><br><b>3375 N COUNTRY CLUB DR #309</b><br><b>AVENTURA, FL 33180</b>           |                                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                              | <b>HYMAN BRODSKY, TR</b><br><b>3375 N. COUNTRY CLUB DR</b><br><b>AVENTURA</b>     |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>D</b><br><b>GERBER, CHERYL</b><br><b>3375 N COUNTRY CLUB DR #1504</b><br><b>AVENTURA, FL 33180</b>          |                                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                              | <b>ETHEL KALKA, DIR</b><br><b>3375 N. COUNTRY CLUB DR</b><br><b>AVENTURA</b>      |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>ST</b><br><b>SAVILLE, PEARL G</b><br><b>3375 N COUNTRY CLUB DR #306 706</b><br><b>AVENTURA, FL 33180</b>    |                                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                              | <b>SCOTT BASSMAN, DIR</b><br><b>3375 N COUNTRY CLUB DR</b><br><b>AVENTURA</b>     |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>VPD</b><br><b>RINKER, ARNOLD</b><br><b>3375 N COUNTRY CLUB DR #1804 1705</b><br><b>AVENTURA, FL 33180</b>   |                                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                              |                                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>PD</b><br><b>CANARICK, HERBERT</b><br><b>3375 N COUNTRY CLUB DR #1805/1806</b><br><b>AVENTURA, FL 33180</b> |                                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                              |                                                                                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>D</b><br><b>LOPEZ, GEORGE</b><br><b>3375 N COUNTRY CLUB DR #303</b><br><b>AVENTURA, FL 33180</b>            |                                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                              |                                                                                   |  |
| 12. I hereby certify that the information supplied with this filing does not qualify 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 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. |                                                                                                                |                                                                                    |                                                                                                                                                                                                                             |                                                                                   |  |
| <b>SIGNATURE:</b> <i>Hyman Brodsky</i> <i>2/09/04</i><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                |                                                                                    |                                                                                                                                                                                                                             |                                                                                   |  |

94017728



02062004 Chg-NP CR2E037 (10/03)

Applied For  
Not Applicable

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

7. Name and Address of New Registered Agent

Name ROBERTS MANAGEMENT

Street Address (P.O. Box Number is Not Acceptable)

1840 NE 153 ST.

City NO. MIAMI Bch. FL Zip Code 33162

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 *Hyman Brodsky* *2/9/04*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE

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

T  
 BRODSKY, HYMAN  
 3375 N COUNTRY CLUB DR #309  
 AVENTURA, FL 33180 ☒ Delete

HYMAN BRODSKY, TR  
 3375 N. COUNTRY CLUB DR  
 AVENTURA ☐ Change ☒ Addition

D  
 GERBER, CHERYL  
 3375 N COUNTRY CLUB DR #1504  
 AVENTURA, FL 33180 ☐ Delete

ETHEL KALKA, DIR  
 3375 N. COUNTRY CLUB DR  
 AVENTURA ☐ Change ☒ Addition

ST  
 SAVILLE, PEARL G  
 3375 N COUNTRY CLUB DR #306 706  
 AVENTURA, FL 33180 ☐ Delete

SCOTT BASSMAN, DIR  
 3375 N COUNTRY CLUB DR  
 AVENTURA ☐ Change ☒ Addition

VPD  
 RINKER, ARNOLD  
 3375 N COUNTRY CLUB DR #1804 1705  
 AVENTURA, FL 33180 ☐ Delete

PD  
 CANARICK, HERBERT  
 3375 N COUNTRY CLUB DR #1805/1806  
 AVENTURA, FL 33180 ☐ Delete

D  
 LOPEZ, GEORGE  
 3375 N COUNTRY CLUB DR #303  
 AVENTURA, FL 33180 ☒ Delete

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SIGNATURE: *Hyman Brodsky* *2/09/04*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #