FILED
Jun 16, 2003 8:00 am
Secretary of State

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05-01-2003 90420 008 ****61.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728556

1. Entity Name

KING COLE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
900 BAY DRIVE MIAMI BEACH FL 33141	900 BAY DRIVE MIAMI BEACH FL 33141

55048281

[redacted]

☐ CHECK HERE IF MAKING CHANGES

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

4. FEI Number 59-1905933 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

% HYMAN & KAPLAN
44 W. FLAGLER ST.
14TH FLOOR COURTHOUSE TOWER
MIAMI FL 33130

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 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 Meredith Spivak MEREDITH SPIVAK MANAGING AGENT 6-9-03

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

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 STEINBERG, PAUL D 900 BAY DRIVE MIAMI BEACH FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres Hoover Jim 900 Bay Dr #49 33141 Miami Bch ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BRANDT, JEROME 900 BAY DRIVE MIAMI BEACH FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V. Pres Bernstein Nicolette 900 Bay Drive Miami Bch 33141 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GRECO, CHRISTOPHER 900 BAY DRIVE #LA04 MIAMI BEACH FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sec Levison Steven 900 Bay Dr Miami Bch 33141 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REY, MARILYN 900 BAY DRIVE #1017 MIAMI BEACH FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Dir Savin Bonifas 900 Bay Dr Miami Bch 33141 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OV HOOVER, JAMES 900 BAY DRIVE, #527 MIAMI BEACH FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Dir Rocha Rolando 900 Bay Dr Miami Bch 33141 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STEINBERG, PAUL 400 BAY DRIVE #PH05 MIAMI BEACH FL 33141	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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.

SIGNATURE: SIGNATURE REQUIRED 5/24/03 305 8615208

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #