DOCUMENT # 735271 1. Entity Name THE WILSHIRE CONDOMINIUM ASSOCIATION, INC.

FILED Apr 13, 2001 8:00 am 8 Secretary of State 04-13-2001 90039 034 ****61.25

					_				
Principal Place of Business		Mailing Address			1				
1250 NE MIAMI GARDENS DR. N MIAMI BCH. FL 33179-1704		1250 NE MIAMI GARDENS DR. N MIAMI BCH. FL 33179-1704			v .	-			
2. Principal	Place of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4	DO NOT WRITE IN THIS	SPACE			
City & State		City & State		4. FEI Number 59-1673299 Applied For Not Applicable					
Zíp Country			Country		5. Certificate of Status Desired See Required Fee Required				
	6. Name and Address of Current	Registered Agent	red Agent		7. Name and Address of New Registered Agent				
			Na	Name					
BECKER, POLIAKOFF & STREITFELD			Street Address (P.O.		P.O. Box Numb	er is Not Acceptable)			
	IRLING RD.								
FT. LAUDERDALE FL 33312-3525		City		у		FL	Zip Code	•	
8. The above	e named entity submits this statement for	or the purpose of changing its	registered of	ice or register	red agent, or bo	th, in the state of Florida.			
	·							-	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	Registered Agen	signature required	when reinstating)	DATE			
	· -					T	<u> </u>		
FILE NOW:					May Be	Make Check			
FEE IS \$61.25		Trust Fund Contribution.		to Fees	Departmen	t of State			
10.	OFFICERS AND DIE	RECTORS .	11.		ADDITIONS/CH	ANGES TO OFFICERS AND DI	RECTORS IN	10	
TITLE	SD	Delete	TITLE	UP	5		Change	Addition	
NAME	WEINER, MCERCY B	/	NAME	Mic	hael 1	liani Burdene		7\	
STREET ADDRESS	1250 NE MIAMI GRDNS DR		STREET ADO				Brice		
CITY-ST-ZIP	N. MIAMI BEACH FL 33179		CITY-ST-Z	Win	um, F	1. 33179			
TITLE	NELTZED ENELVAL	☐ Delete	TITLE	30	١ ٨٨	114-0-	Change	☐ Addition	
NAME STREET ADDRESS	MELTZER, EVELYN		NAME			11+ zec Gami Gardens 1	Soire		
CITY-ST-ZIP	1250 NE MIAMI GRONS DR N MIAMI BCH FL		STREET ADD		mi Fl	33179	wite man		
TITLE	VPD	☐ Delete	TITLE	10	, <u> </u>	1	Change	Addition	
NAME	WULKAN, JACK	L DOICE	NAME	Sar	idva !	Buch _			
STREET ADDRESS	1250 NE MIAMI GRDNS DR		STREET ADD	RESS \\Z	io Ne I	himmi Garden	y Driv	2	
CITY-ST-ZIP	N MIAMI BCH FL		CITY-ST-ZII	<u>' M</u>	ami F	1. 33179			
TITLE								Addition	
	T	☐ Delete	TITLE	D		Malla Frales	☐ Change	Addition	
NAME	T BENSON, NAOMI	☐ Delete	NAME	Adr		Holin-Foster	☐ Change	ise.	
NAME STREET ADDRESS	1250 NE MIAMI GRDNS DR	☐ Delete	NAME Street add	Adr.	Jenne	Holin-Foster	□ Change	Jue Jue	
NAME STREET ADDRESS CITY-ST-ZIP	1250 NE MIAMI GRDNS DR N MIAMI BCH FL		NAME STREET ADD CITY-ST-ZIF	RESS Add		Holin-Foster M. ann Gard 1. 33179	ms Dr	ive	
NAME STREET ADDRESS	1250 NE MIAMI GRONS DR N MIAMI BCH FL	☐ Delete	NAME STREET ADD C!TY-ST-ZIF	RESS PA	venne mui, F	(33/14	Change Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE	1250 NE MIAMI GRDNS DR N MIAMI BCH FL		NAME STREET ADD CITY-ST-ZIF	Add 12, 12, 12, 12, 12, 12, 12, 12, 12, 12,	venne mui, F	(33/14	Change	ive	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1250 NE MIAMI GRONS DR N MIAMI BCH FL JAPO ZUCKERMAN, DAVID		NAME STREET ADD CITY-ST-ZIR TITLE NAME	Add PD 2uc 1250	venne mui, F	1. 23114 1. David	Change	ive	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1250 NE MIAMI GRDNS DR N MIAMI BCH FL JAPO ZUCKERMAN, DAVID 1250 NE MIAMI GRDNS DR		NAME STREET ADD C!TY-ST-ZIR TITLE NAME STREET ADD	Add PD 2uc 1250	venne mm , F kerman He Min	1. David	Change	ive	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1250 NE MIAMI GRDNS DR N MIAMI BCH FL JAPO ZUCKERMAN, DAVID 1250 NE MIAMI GRDNS DR	. □ Delete	NAME STREET ADD CITY-ST-ZIF TITLE NAME STREET ADDI CITY-ST-ZIF TITLE NAME	Add	venne so ivi E mui, F kerman he min mui, F	1. 33119 um burdens o 1. 33179 Frand	Change	☐ Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1250 NE MIAMI GRDNS DR N MIAMI BCH FL JAPO ZUCKERMAN, DAVID 1250 NE MIAMI GRDNS DR	. □ Delete	NAME STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF TITLE	Address 12.	venne so ivi g mui , F kerman he min mui , F chard	1. David	Change	☐ Addition Addition	

increuy 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:

305-947-14-18