


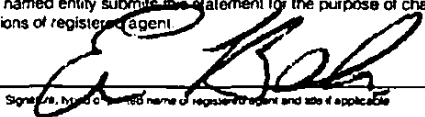

FILED
May 01, 2007 8:00 am
Secretary of State

04-04-2007 90187 004 ****61.25

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

66012315



DOCUMENT # 741346			
1. Entity Name VENETIAN PARK CONDOMINIUM V ASSOCIATION, INC.			
Principal Place of Business 2211 NE 7TH STREET HALLANDALE, FL 33009 US		Mailing Address C/O SIDNEY SCHUCHMAN, CPA POST OFFICE BOX 970637 BOCA RATON, FL 33497-0637	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address C/O E PETROCELLI	
Suite, Apt. #, etc.		Suite, Apt. #, etc. PO BOX 85035	
City & State		City & State HALLANDALE FL	
Zip	Country	Zip	Country
		33009	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
KOLBER, ESTHER 2211 NE 7TH STREET HALLANDALE, FL 33009		Name ERIC BEHAR	
		Street Address (P.O. Box Number is Not Acceptable)	
		City 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 3/23/07	
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD KOLBER, ESTHER <input type="checkbox"/> Delete	TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS	2211 NE 7TH STREET	STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE, FL 33009	CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> Delete	TITLE	VPO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	AZZOLI, VALENTINO	NAME	WAINSTEIN, MARK
STREET ADDRESS	2208 NE 7TH STREET	STREET ADDRESS	8202 NE 7 STREET
CITY-ST-ZIP	HALLANDALE, FL 33009	CITY-ST-ZIP	HALLANDALE FL 33009
TITLE	SD <input type="checkbox"/> Delete	TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MUROCH, STELLA	NAME	
STREET ADDRESS	2201 NE 7TH STREET	STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE, FL 33009	CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	
NAME	BERAJA, ISAAC	NAME	
STREET ADDRESS	2223 NE 7 ST	STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE, FL 33009	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEHAR, ERIC	NAME	BEHAR, ERIC
STREET ADDRESS	2221 NE 7 ST	STREET ADDRESS	8223 NE 7 STREET
CITY-ST-ZIP	HALLANDALE, FL 33009	CITY-ST-ZIP	HALLANDALE FL 33009
TITLE		TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	SHERMAN, YEVGENY
STREET ADDRESS		STREET ADDRESS	2214 NE 7 STREET
CITY-ST-ZIP		CITY-ST-ZIP	HALLANDALE FL 33009
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: 		DATE 3/23/07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	