

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 20, 2009  
Secretary of State**

DOCUMENT# 746396

Entity Name: 1900 MERIDIAN CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1900 MERIDIAN AVENUE  
CONDOMINIUM MAIL BOX  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

**Current Mailing Address:**

1900 MERIDIAN AVENUE  
CONDOMINIUM MAIL BOX  
MIAMI BEACH, FL 33139 US

**New Mailing Address:**

FEI Number: 59-2018313      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ASTIGIANO, DANILO  
1900 MERIDIAN AVE.  
MIAMI BEACH, FL 33139 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SCHNAIDER, BORIS  
Address: 1900 MERIDIAN AVE. #503  
City-St-Zip: MIAMI BCH, FL 33139

Title: T ( ) Delete  
Name: GRANDA, MIRTA  
Address: 1900 MERIDIAN AVE #501  
City-St-Zip: MIAMI BCH, FL 33139

Title: S ( ) Delete  
Name: GONZALEZ, YOLANDA  
Address: 1900 MERIDIAN AVE. #404  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIRTHA GRANDA

T

02/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date