

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747627

FILED  
Feb 13, 2006  
Secretary of State

Entity Name: 1155 BUILDING CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1155 98TH STREET APT 1  
BAY HARBOR ISLAND, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

% NORMAN SHAPIRO  
1155 98TH STREET APT 1  
BAY HARBOR ISLAND, FL 33154

**New Mailing Address:**

FEI Number: 59-2349205      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WOLLAND, FRANK ESQ  
12865 W DIXIE HWY  
N. MIAMI, FL 33160 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: PD ( ) Delete  
Name: SHAPIRO, NORMAN  
Address: 1155 98TH STREET APT 1  
City-St-Zip: BAY HARBOR ISLAND, FL 33154

Title: STD ( ) Delete  
Name: MITRANI, JERI  
Address: 1155 98TH STREET APT 3  
City-St-Zip: BAY HARBOR ISLAND, FL 33154

Title: D ( ) Delete  
Name: FABRIKANT, GARY  
Address: 1155 98TH STREET APT 3  
City-St-Zip: BAY HARBOR ISLAND, FL 33154

Title: D ( ) Delete  
Name: SHAPIRO, TILLIE  
Address: 1155 98TH STREET APT 1  
City-St-Zip: BAY HARBOR ISLAND, FL 33154

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: NORMAN SHAPIRO

PD

02/13/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date