

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768456

FILED  
Sep 09, 2007  
Secretary of State

Entity Name: SIXTH AVE WAREHOUSE CONDO ASSOCIATION, INC.

**Current Principal Place of Business:**

11515 S.W. 97TH AVENUE  
MIAMI, FL 33176 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 16-3000  
MIAMI, FL 33116 US

**New Mailing Address:**

FEI Number: 59-2395910      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MARKS, JEAN N  
11515 SW 97 AVE  
MIAMI, FL 33176 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: VPD ( ) Delete  
Name: BALSERA, LEONARDO  
Address: 212 SW 6 AVENUE  
City-St-Zip: HOMESTEAD, FL

Title: STD ( ) Delete  
Name: MARKS, JEAN N  
Address: 11515 SW 97 AVE  
City-St-Zip: MIAMI, FL

Title: PD ( ) Delete  
Name: BARNES, MICHAEL  
Address: 228 SW 6 AVE  
City-St-Zip: HOMESTEAD, FL 33030

Title: D ( ) Delete  
Name: ESPINOSA, CARLOS  
Address: 30302 SW 152 PL  
City-St-Zip: HOMESTEAD, FL 33033

Title: D ( ) Delete  
Name: RAMIREZ, BRUCE  
Address: 13400 SW 188 AVE  
City-St-Zip: MIAMI, FL 33196

**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: D (X) Change ( ) Addition  
Name: RAMOS, STAR  
Address: 220 S.W. 6TH AVENUE  
City-St-Zip: HOMESTEAD, FL 33030

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: JEAN N. MARKS

Electronic Signature of Signing Officer or Director

STD

09/09/2007

Date