


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 31, 2006 08:00 AM
Secretary of State

DOCUMENT # N01000001163
 1. Entity Name
MASADA CONDOMINIUM ASSOCIATION INC.



Principal Place of Business
3901 INDIAN CREEK DR, BOX 518
MIAMI BEACH, FL 33140

Mailing Address
3901 INDIAN CREEK DR, BOX 518
MIAMI BEACH, FL 33140



07192006 No Chg-NP CR2E037 (4/06)

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4. FEI Number
65-0349429

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BERGER, WILLIAM
3901 INDIAN CREEK DR, #308
MIAMI BEACH, FL 33140

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BERGER, WILLIAM
STREET ADDRESS	3901 INDIAN CREEK DR, #308
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	V
NAME	KAMINER, EUGENE
STREET ADDRESS	3901 INDIAN CREEK DR, #408
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	T
NAME	KALISCH, JACOB
STREET ADDRESS	3901 INDIAN CREEK DR, #305
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	D
NAME	LIEBER, LEO
STREET ADDRESS	3901 INDIAN CREEK DR, #403
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	D
NAME	MEDINA, TERESA
STREET ADDRESS	3901 INDIAN CREEK DR, #506
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	D
NAME	KLEIN, IRENE
STREET ADDRESS	3901 INDIAN CREEK DR, #207
CITY-ST-ZIP	MIAMI BEACH, FL 33140

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 08/01/06-80005-005 61.25

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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: William Berger Date: 7/21/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR