

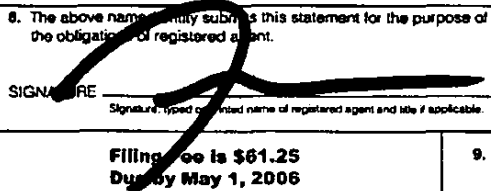
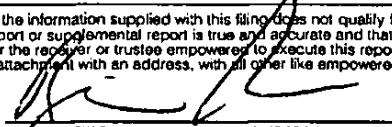
2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

4/27/2006-90172-038-\$61.25-\$61.25

FILED

06 JUN -6 PM 7:58

SECRET
TALLAHASSEE

DOCUMENT # N05000001685			
1. Entity Name COCOPLUM BY QUANTUM PROPERTY OWNERS ASSOCIATION, INC.			
Principal Place of Business 1560 SOUTH DIXIE HIGHWAY SUITE 211 CORAL GABLES, FL 33146		Mailing Address 1560 SOUTH DIXIE HIGHWAY SUITE 211 CORAL GABLES, FL 33146	
2. Principal Place of Business 1145 Sawgrass Corp Pkwy Suite, Apt. #, etc.		3. Mailing Address 1145 Sawgrass Corp Pkwy Suite, Apt. #, etc.	
City & State Sunrise 71		City & State Sunrise 71	
Zip 33323		Zip 33323	
Country		Country	
6. Name and Address of Current Registered Agent VANDER, STEVEN J ESQ 200 SOUTH BISCAYNE BLVD SUITE 4900 MIAMI, FL 33131		7. Name and Address of New Registered Agent Name Katzman C Korr, Leigh Katzman Street Address (P.O. Box Number is Not Acceptable) 1501 NW 49th St Suite 200 City Ft. Lauderdale FL Zip Code 33309	
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 obligation of registered agent.			
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.		DATE 4/11/06 (NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$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 NAME STREET ADDRESS CITY-ST-ZIP	PD BARBARA, OSCAR A 1560 SOUTH DIXIE HIGHWAY SUITE 211 CORAL GABLES, FL 33146 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Richard Dacunha Jr. 1145 Sawgrass Corp Pkwy Sunrise 71 33323 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD EISENACHER, HAROLD L 1560 SOUTH DIXIE HIGHWAY SUITE 211 CORAL GABLES, FL 33146 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Cindy Ruocco 1145 Sawgrass Corp Pkwy Sunrise 71 33323 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MACHADO, JOSE LUIS ESQ 8500 SW 8TH STREET SUITE 238 MIAMI, FL 33144002 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Leonid Raskina 1145 Sawgrass Corp Pkwy Sunrise 71 33323 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: 		RICHARD DACUNHA 3/28/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

954-322-7919