## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000006754

FILED Apr 14, 2009 Secretary of State

Entity Name: DE SOLEIL SOUTH BEACH ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1501 COLLINS AVE., STE. 300 1437 COLLINS AVENUE MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

**Current Mailing Address: New Mailing Address:** 

1501 COLLINS AVE., STE. 300 420 LINCOLN ROAD MIAMI BEACH, FL 33139 SUITE 357

MIAMI BEACH, FL 33139

FEI Number: 20-5105270 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MOLKO, RONALD S. TAIC, LOUIS 1501 CÓLLINS AVE., STE. 300 420 LINCOLN ROAD MIAMI BEACH, FL 33139 SUITE 357

MIAMI BEACH, FL 33139 US 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: LOUIS TAIC

**OFFICERS AND DIRECTORS:** 

04/14/2009

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

DP () Delete (X) Change ( ) Addition MOLKO, RONALD S. TAIC, LOUIS Name: Name:

1501 COLLINS AVE., STE. 300 Address: 420 LINCOLN ROAD SUITE 357 Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: DST () Delete Title: () Change () Addition

Name: GRABARNICK, GENE Name: Address: 1501 COLLINS AVE., STE, 300 Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

GRABARNICK, GARETT Name: Name: 1501 COLLINS AVE., STE. 300 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 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: LOUIS TAIC DP 04/14/2009