

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008582

FILED  
Jun 28, 2009  
Secretary of State

**Entity Name:** 3145-3147 JACKSON AVENUE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

RICHARD SCHRIBER  
3145 JACKSON AVE.  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

RICHARD SCHRIBER  
3145 JACKSON AVE.  
MIAMI, FL 33133

**New Mailing Address:**

**FEI Number:** 57-1240831 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
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:**

SCHRIBER, RICHARD  
3145 JACKSON AVE.  
MIAMI, FL 33133 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: D ( ) Delete  
Name: SCHRIBER, RICHARD  
Address: 3145 JACKSON AVE.  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: HERRERA, ALEX  
Address: 3145 JACKSON AVE  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: DESIDERIO, GIULIO  
Address: 3145 JACKSON AVE,  
City-St-Zip: MIAMI, FL 33133

**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:

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: RICHARD SCHRIBER

D

06/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date