

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -1 PM 12:10

DOCUMENT # **N40414** (7)

1. Corporation Name

1000 ISLAND BOULEVARD CONDOMINIUM ASSOCIATION, I
NC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
1000 ISLAND BLVD 1000 ISLAND BLVD
NORTH MIAMI BCH FL 33160 NORTH MIAMI BCH FL 33160

3. Date Incorporated or Qualified 10/19/1990 3a. Date of Last Report 02/18/1994

4. FEI Number 65-0225762 Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

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

22 City & State 27 City & State

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

23 Zip Country 28 Zip Country

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

24 Zip Country 25 Country 29 Zip Country 30

8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARSHALL, KEITH M ESQ.
18301 BISCAYNE, BLVD.
GREAT WESTERN BANK BLDG. 2ND FLOOR
N. MIAMI BEACH FL 33160

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Keith M. Marshall, Esq.* DATE: 1/25/95
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME GUSTIN, DON
STREET ADDRESS 1000 ISLAND BLVD #1809
CITY-ST-ZIP N MIAMI BEACH FL

1.1 TITLE D
1.2 NAME BERGER, ARTHUR
1.3 STREET ADDRESS 1000 ISLAND BLVD #512
1.4 CITY-ST-ZIP N MIAMI BEACH FL
 Change Addition

TITLE VD
NAME WEISS, JUNE
STREET ADDRESS 1000 ISLAND BLVD #606
CITY-ST-ZIP NORTH MIAMI BCH FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
 Change Addition

TITLE SD
NAME COHEN, TED
STREET ADDRESS 1000 ISLAND BLVD #3007
CITY-ST-ZIP N MIAMI BEACH FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
 Change Addition

TITLE TD
NAME BERGMAN, PHIL
STREET ADDRESS 1000 ISLAND BLVD #1109
CITY-ST-ZIP N. MIAMI BEACH FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
 Change Addition

TITLE D
NAME DEUTSCH, MORT
STREET ADDRESS 1000 ISLAND BLVD #2003
CITY-ST-ZIP N MIAMI BCH FL

5.1 TITLE PD
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
 Change Addition

TITLE D
NAME SHAPLEY, HARVEY
STREET ADDRESS 1000 ISLAND BLVD #3106
CITY-ST-ZIP N MIAMI BCH. FL

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
 Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made in person; that I am an officer or director of the corporation or its receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 4P or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Mort Deutsch* DATE: 1/25/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR