2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004
Secretary of State

DOCUMENT# N99000005274

Entity Name: THE MERCURY SOUTH BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

100 COLLINS AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

C/O BLUE SKY REAL ESTATE MANAGEMENT, INC.
PO BOX 190333
MIAMI BEACH, FL 33119

New Mailing Address:

C/O BLUE SKY REAL ESTATE MANAGEMENT, INC.
723 14TH PL STE 9
MIAMI BEACH, FL 33139

FEI Number: 65-0949395 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLUE SKY REAL ESTATE MANAGEMENT, INC.
723 14TH PL,
STE 9
MIAMI BEACH, FL 33139 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: CHEVETZ, MYLES
Address: 161 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33129

Title: D ( ) Delete
Name: BISHOP, ROBERT
Address: 665 THERESA AVE
City-St-Zip: HERMITAGE, PA 16148

Title: D ( ) Delete
Name: KADO, KARL
Address: 1266 OCEAN AVE 20
City-St-Zip: SEA BRIGHT, NJ 07660

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: LADOWSKY, KIM
Address: 1200 GLENEAGLES CT.
City-St-Zip: LAKE GENEVA, WI 53147

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KARL KADO D 03/19/2004

Electronic Signature of Signing Officer or Director — Date