## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P99000099080

18 - K FLORIDA HOLDINGS INC.



**FILED** Feb 22, 2007 08:00 AM **Secretary of State** 

Principal Place of Business

B. CONDO ASSOCIATION 9801 COLLINS AVE MIAMI BEACH, FL 33154 Mailing Address

I. AIZENMAN JBC S32 #220 POB 025240 MIAMI, FL 33102



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No Chg-P CR2E034 (11/05) 01182007

4. FEI Number 65-0991647

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ARAZOZA & FERNANDEZ, P.A. C/O 2100 SALZEDO STREET **SUITE 300** CORAL GABLES, FL 33134

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named entity submits this statement for the plons of registered agent.	urpose of changing its regi	istered office or re	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept
				<u> </u>
Signature, typed or printed name of registered agent and title i	f applicable. (NOTE: Reg	gistered Agent signature	required when reinstating)	DATE
E NOWI!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00		~ —	\$5.00 May Be Added to Fees	U00000644099 03/02/07~80027-025 150.00
OFFICERS AND DIREC	TORS		· · ·	
•	OB 025240			
	Signature, typed or printed name of registered agent and title i  E NOWILL FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00  OFFICERS AND DIRECT D AIZENMAN, IGNACIO	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re  E NOWILL FEE IS \$150.00  Ay 1, 2007 Fee will be \$550.00  OFFICERS AND DIRECTORS  D  AIZENMAN, IGNACIO AIZENMAN, IGNACIO JBCSJO#220 POB 025240	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alguature  E NOWILL FEE IS \$150.00  AY 1, 2007 Fee will be \$550.00  OFFICERS AND DIRECTORS  D  AIZENMAN, IGNACIO AIZENMAN, IGNACIO JBCSJO#220 POB 025240	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algoriture required when reinstating)  E NOWIL! FEE IS \$150.00  9. Election Campaign Financing Trust Fund Contribution.  OFFICERS AND DIRECTORS  D AIZENMAN, IGNACIO AIZENMAN, IGNACIO JBCSJO#220 POB 025240

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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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURI	Ε
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

TIT1 F NAME STREET ADDRESS CITY-ST-ZIP TITLE

NAME OF SIGNING OFFICER OR DIRECTOR

70-50-<del>7</del>0 --

Daytima Phone #