

**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

**APPROVED  
AND  
FILED**

**DOCUMENT # 723756 (3)**

1. Corporation Name

**ARLEN HOUSE WEST CONDOMINIUM ASSOCIATION, INC.**

95 JUN 27 AM 11:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

500 BAYVIEW DRIVE  
NO. MIAMI BEACH FL 33160

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NO. MIAMI BEACH FL 33160

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**06/28/1972**

3a. Date of Last Report  
**04/28/1994**

4. FB Number  
**13-2766132**

Applied For  
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

23 City & State

26 City & State

24 Zip

25 Country

29 Zip

30 Country

5. Certificate of Status Desired ☐

**\$5.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

7. Nonprofit with IRS 501(c)(3)  
Tax Exempt Status ☐

**\$68.75** Supplemental  
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**FELDMAN, MICHAEL  
1135 KANE CONCOURSE  
BAY HARBOR ISLANDS FL 33154**

10. Name and Address of New Registered Agent

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 607.1506, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD**  
NAME **SOBER, SIDNEY**  
STREET ADDRESS **500 BAYVIEW DRIVE**  
CITY- ST- ZIP **N MIAMI BEACH FL**

TITLE **V**  
NAME **YECIES, T**  
STREET ADDRESS **500 BAYVIEW DRIVE**  
CITY- ST- ZIP **N. MIAMI BEACH FL**

TITLE **T**  
NAME **ROSENFELD, GENE**  
STREET ADDRESS **500 BAYVIEW DRIVE**  
CITY- ST- ZIP **N MIAMI BEACH FL**

TITLE **S**  
NAME **ARKIN, JOSEPH**  
STREET ADDRESS **500 BAYVIEW DRIVE**  
CITY- ST- ZIP **N MIAMI BEACH FL**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD/D** ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE **V/D** ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE **T/D** ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE **S/D** ☒ Change ☐ Addition

4.2 NAME **WEINER, BENJAMIN**

4.3 STREET ADDRESS **SAME**

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

**REMITTED BY MAY 1**

**\$ Deposited by Bank**

**4/27**

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)(k), 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 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**Sidney Sober (P.S.)**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/24/95 (305) 944-2348**  
Date Secretary Herein