2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # N23711**

FILED Apr 03, 2006 8:00 am Secretary of State 04-03-2006 90406 021 ****61.25

PORTSVI ASSOCIA	IEW AT 1	THE WATERWAYS IC.	CONDOMINIUM				0 1 05 2 000			
Principal Place of Business C/O MANAGEMENT OFFICE 3610 YACHT CLUB DR AVENTURA, FL 33180 Mailing Address C/O MANAGEMENT OFFICE 3610 YACHT CLUB DR AVENTURA, FL 33180								-	08356	
2. Principal Place of Business 3			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03092006	Chg-NP	CR2E0	37 (11/0	5)
City & State			City & State			4. FEI Numbe 59-259:			F	Applied For Not Applicable
Zip	Country		Zip Co.		intry	5. Certificate of Status Desired S8.75 Additional Fee Required				
	and Address of Current R	egistered Agent			7. Name and	Address of New F	Registered	Agent		
DENNIS E	ISINGER				Name					
DENNIS EISINGER C/O PHILLIPS, EISINGER & KOSS, P.A. 4000 HOLLYWOOD BLVD SUITE 265 SOUTH					Street Address (P.O. Box Number is Not Acceptable)					
HOLLYWO	JOD, FL 3	33021		<u> </u>				FI	Zip C	Code
The above named entity submits this statement for the purpose of changing its registered office or regist the obligations of registered agent.						ered agent, or bot	h, in the State of Fl			ith, and accept
DIO COMBO	-	corou again.								
SIGNATURE .	Signature, typed	or printed name of registered agent an	M E	- Registerer	d Agent signature require					
	•		,,			ed when reinstating)		DATE		
	Filing Fe	e is \$61.25 fay 1, 2006	9. Election Cam Trust Fund C	npaign F	inancing	\$5.00 May B Added to Fees		lake chec		
10.	Filing Fe Due by N	e is \$61.25	9. Election Carr Trust Fund C	npaign F	inancing	\$5.00 May B Added to Fees		lake chec rida Depa	rtment of	f State
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mareury ceruity unature information supplied with this filling 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

03/17/06

305-935-5857.