

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717860

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** BAYSHORE PLACE CONDOMINIUM, INC.

**Current Principal Place of Business:**

1420 BRICKELL BAY DR  
MIAMI, FL 33131 US

**New Principal Place of Business:**

**Current Mailing Address:**

1420 BRICKELL BAY DR  
MIAMI, FL 33131 US

**New Mailing Address:**

FEI Number: 59-1475007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ZAMORA, NELLY  
1420 BRICKELL BAY DR  
MIAMI, FL 33131 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: DP  
Name: REMENYI, ANA M  
Address: 1420 BRICKELL BAY DR  
City-St-Zip: MIAMI, FL 33131

Title: DT  
Name: GARCIA, TERESA  
Address: 1420 BRICKELL BAY DRIVE  
City-St-Zip: MIAMI, FL 33131

Title: DS  
Name: ACOSTA, ADRIANA  
Address: 1420 BRICKELL BAY DR  
City-St-Zip: MIAMI, FL 33131

Title: D VP  
Name: PEREZ-CISNEROS, PABLO  
Address: 1420 BRICKELL BAY DR.  
City-St-Zip: MIAMI, FL 33131

Title: D  
Name: MORALES, YOLANDA  
Address: 1420 BRICKELL BAY DRIVE  
City-St-Zip: MIAMI, FL 33131

Title: D  
Name: ESPAILLAT, MARIA  
Address: 1420 BRICKELL BAY DRIVE  
City-St-Zip: MIAMI, FL 33131

I hereby 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 all other like empowered.

SIGNATURE: ANA M. REMENYI

PRES

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date