2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT\# 751049

Entity Name: BELLE PLAZA CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

20 ISLAND AVENUE MIAMI BEACH, FL 33139

## Current Mailing Address:

20 ISLAND AVENUE
MIAMI BEACH, FL 33139
FEI Number: 59-2016637
Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MARS, GARY ESQ.
150 WEST FLAGLER, 27TH FLOOR
MUSEUM TOWER
MIAMI, FL 33130 US

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

## Officer/Director Detail :

| Title | P | Title | VP |
| :---: | :---: | :---: | :---: |
| Name | AGLIALORO, JOHN | Name | TARANTINO, DIEGO |
| Address | $\begin{aligned} & 20 \text { ISLAND AVE } \\ & 1214 \end{aligned}$ | Address | $\begin{aligned} & 20 \text { ISLAND AVE } \\ & 1102 \end{aligned}$ |
| City-State-Zip: | MIAMI BEACH FL 33139 | City-State-Zip: | MIAMI BEACH FL 33139 |
| Title | T | Title | S |
| Name | FINERMAN, ERIC | Name | MCGUGAN, DAVID |
| Address | $\begin{aligned} & 20 \text { ISLAND AVE. } \\ & 804 \end{aligned}$ | Address | $\begin{aligned} & 20 \text { ISLAND AVE. } \\ & 1604 \end{aligned}$ |
| City-State-Zip: | MIAMI BEACH FL 33139 | City-State-Zip: | MIAMI BEACH FL 33139 |
| Title | D | Title | D |
| Name | LEEDS, DAVID | Name | LEE, JOHN |
| Address | 20 ISLAND AVE 607 | Address | 20 ISLAND AVE 402 |
| City-State-Zip: | MIAMI BEACH FL 33139 | City-State-Zip: | MIAMI BEACH FL 33139 |
| Title | DIRECTOR |  |  |
| Name | MILLER, JOHN |  |  |
| Address | $\begin{aligned} & 20 \text { ISLAND AVE } \\ & 1603 \end{aligned}$ |  |  |
| City-State-Zip: | MIAMI BEACH FL 33139 |  |  |

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: JOHN AGLIALORO
PRESIDENT
01/18/2013
Electronic Signature of Signing Officer/Director Detail
Date

