#### 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: PAUL LEVINSON

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N0200006032

Entity Name: OCEANIA V CONDOMINUM ASSOCIATION, INC.

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

**Current Principal Place of Business:** 

16500 COLLINS AVE SUNNY ISLES BEACH, FL 33160

REPORT

# **Current Mailing Address:**

ADMINISTRATION OFFICE **16500 COLLINS AVENUE** SUNNY ISLES BEACH, FL 33160 US

# FEI Number: 03-0478036

# Name and Address of Current Registered Agent:

KATZMAN GARFINKEL 5927 WEST COPANS ROAD MARGATE, FL 33063 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:	ALIX NAVARRO		05/06/2016
	Electronic Signature of Registered Agent		Date
Officer/Director Detail :			
Title	P	Title	VP/S
Name	LEVINSON, PAUL	Name	POLIAKOVA, NATALIA
Address	16500 COLLINS AVE, UNIT #2851	Address	16500 COLLINS AVE, UNIT # 2652
City-State-Zip:	SUNNY ISLES BEACH FL 33160-4593	City-State-Zip:	SUNNY ISLES BEACH FL 33160-4593
Title	т		
Name	SCHWEIFEL, GARY		
Address	16500 COLLINS AVE, UNIT #1654		
City-State-Zip:	SUNNY ISLES BEACH FL 33160-4593		

PRESIDENT

05/06/2016

FILED May 06, 2016 Secretary of State CC3944927136

Certificate of Status Desired: No

Date