

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003848

Entity Name: 1701 MERIDIAN BUILDING CONDOMINIUM ASSOCIATION, INC.**FILED**
Feb 19, 2015
Secretary of State
CC1239790930**Current Principal Place of Business:**C/O CITY ATTORNEY
1700 CONVENTION CENTER DRIVE 4TH FLOOR
MIAMI BEACH, FL 33139**Current Mailing Address:**C/O CITY ATTORNEY
1700 CONVENTION CENTER DRIVE 4TH FLOOR
MIAMI BEACH, FL 33139 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AGUILA, RAUL
1700 CONVENTION CENTER DRIVE
4TH FLOOR
MIAMI BEACH, FL 33139 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:** RAUL AGUILA

02/19/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	LEVINE, PHILIP
Address	1700 CONVENTION CENTER DRIVE 4TH FLOOR
City-State-Zip:	MIAMI BEACH FL 33139

Title	D
Name	WOLFSON, JONAH
Address	1700 CONVENTION CENTER DRIVE 4TH FLOOR
City-State-Zip:	MIAMI BEACH FL 33139

Title	D
Name	STEINBERG, MICKY
Address	1700 CONVENTION CENTER DRIVE 4TH FLOOR
City-State-Zip:	MIAMI BEACH FL 33139

Title	D
Name	WEITHORN, DEEDE
Address	1700 CONVENTION CENTER DRIVE 4TH FLOOR
City-State-Zip:	MIAMI BEACH FL 33139

Title	D
Name	GRIECO, MICHAEL
Address	1700 CONVENTION CENTER DRIVE 4TH FLOOR
City-State-Zip:	MIAMI BEACH FL 33139

Title	D
Name	TOBIN, EDWARD L
Address	1700 CONVENTION CENTER DRIVE 4TH FLOOR
City-State-Zip:	MIAMI BEACH FL 33139

Title	D
Name	MALAKOFF, JOY
Address	1700 CONVENTION CENTER DRIVE 4TH FLOOR
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: PHILIP LEVINE

PD

02/19/2015

Electronic Signature of Signing Officer/Director Detail

Date