

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33474

**FILED**  
**Feb 09, 2016**  
**Secretary of State**  
**CC1044721574**

**Entity Name:** OCEANIA CLUB, INC.

**Current Principal Place of Business:**

16421 COLLINS AVENUE  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

16421 COLLINS AVENUE  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number:** 65-0135255

**Certificate of Status Desired:** No

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

ALLIANCE CAS, LLC  
1000 E. HALLANDALE BEACH BLVD.  
HALLANDALE BEACH, FL 33009 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

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEVINSON, PAUL  
Address        16421 COLLINS AVE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            VP  
Name            HIGGINS, JOHN  
Address        16421 COLLINS AVE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            SECRETARY  
Name            AQUINO,, GEORGETTE  
Address        16421 COLLINS AVENUE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            TREASURER  
Name            FOWLER, JIM  
Address        16421 COLLINS AVENUE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            DIRECTOR  
Name            SILVERMAN, MARVIN  
Address        16421 COLLINS AVENUE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** JIM FOWLER

**TREASURER**

**02/09/2016**

Electronic Signature of Signing Officer/Director Detail

Date