

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33474

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