

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001352

**Entity Name:** NEWPORT MIAMI BEACH CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 12, 2017**  
**Secretary of State**  
**CC9668362153**

**Current Principal Place of Business:**

16701 COLLINS AVE.  
MIAMI BEACH, FL 33160

**Current Mailing Address:**

16701 COLLINS AVE.  
SUITE 100  
MIAMI BEACH, FL 33160 US

**FEI Number: 65-0490691**

**Certificate of Status Desired: No**

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

CORNFELD, ROBERT M  
3850 HOLLYWOOD BLVD., STE 400  
HOLLYWOOD, FL 33021 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 PD  
Name SAM, MARTHA  
Address 16701 COLLINS AVE.  
City-State-Zip: MIAMI BEACH FL 33160

Title VPD  
Name ELADIO, ARENCIBIA  
Address 3850 HOLLYWOOD BLVD #400  
City-State-Zip: HOLLYWOOD FL 33021

Title STD  
Name NYHUIS, RAY  
Address 16701 COLLINS AVE.  
City-State-Zip: MIAMI 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: MARTHA SAM**

**PRESIDENT**

**01/12/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date