

**2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N98000004179

**Entity Name:** 1500 OCEAN DRIVE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jun 14, 2018**  
**Secretary of State**  
**CC9251753815**

**Current Principal Place of Business:**

1500 OCEAN DRIVE  
MANAGEMENT OFFICE  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1500 OCEAN DRIVE  
MANAGEMENT OFFICE  
MIAMI BEACH, FL 33139 US

**FEI Number: 65-0871783**

**Certificate of Status Desired: No**

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

HALPERN, MARC AESQ.  
HALPERN RODRIGUEZ, L.L.P  
355 ALHAMBRA CIRCLE SUITE 1101  
CORAL GABLES, FL 33134 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            MARIO, GREGORY  
Address        1500 OCEAN DRIVE  
                  PH05  
City-State-Zip: MIAMI BEACH FL 33139

Title            VP, SECRETARY  
Name            FLAX, INES  
Address        1500 OCEAN DRIVE UNIT  
                  #407  
City-State-Zip: MIAMI BEACH FL 33139

Title            TREASURER  
Name            ROSENBAUM, HAROLD  
Address        1500 OCEAN DRIVE  
                  #605  
City-State-Zip: MIAMI BEACH FL 33139

Title            DIRECTOR  
Name            MINDLIN, ILIANA  
Address        1500 OCEAN DRIVE UNIT #UPH3  
City-State-Zip: MIAMI BEACH FL 33139

Title            DIRECTOR  
Name            MORALES, IBRA  
Address        1500 OCEAN DRIVE  
                  #402-404  
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: INES FLAX**

**VP/SECRETARY**

**06/14/2018**

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

\_\_\_\_\_  
Date