2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# 707828

Entity Name: ASTOR CONDOMINIUM NO.3,INC.

Current Principal Place of Business:

3501 VAN BUREN ST
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

3501 VAN BUREN ST
#3
HOLLYWOOD, FL 33021 US

Current Mailing Address:

3501 VAN BUREN ST
HOLLYWOOD, FL 33021 US

New Mailing Address:

3501 VAN BUREN ST
#3
HOLLYWOOD, FL 33021 US

FEI Number: 59-6169263 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORRES, LISA
3501 VAN BUREN ST
#3
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	S	( ) Delete
Name:	ZANDOLI, LORI	
Address:	3501 VAN RUREN ST #1	
City-St-Zip:	HOLLYWOOD, FL 33021	
Title:	P	( ) Delete
Name:	TORRES, LIZA	
Address:	3501 VAN BUREN ST	
City-St-Zip:	HOLLYWOOD, FL	
Title:	T	( ) Delete
Name:	CAFARO, RUDOLPH	
Address:	3501- VAN BUREN ST.	
City-St-Zip:	HOLLYWOOD, FL 33021	
Title:	ST	( ) Delete
Name:	ZANDOLI, LORETTA	
Address:	3501 VAN BUREN STR	
City-St-Zip:	HOLLYWOOD, FL	
Title:	D	( ) Delete
Name:	ANTON, EDMUND	
Address:	3501 VAN BUREN ST #8	
City-St-Zip:	HOLLYWOOD, FL 33021	
Title:	VP	( ) Delete
Name:	TORRES, EDUARDO	
Address:	3501 VAN BUREN STREET #11	
City-St-Zip:	HOLLYWOOD, FL 33021 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LIZA MARIE TORRES PRES 04/30/2009

Electronic Signature of Signing Officer or Director — Date