

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709126

FILED  
Feb 03, 2012  
Secretary of State

**Entity Name:** THE TWIN TOWERS CONDOMINIUM, INC.

**Current Principal Place of Business:**

790 WEST 20TH STREET  
2ND FLOOR  
HIALEAH, FL 33010

**New Principal Place of Business:**

1614/1620 WEST AVE  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

790 WEST 20TH STREET  
2ND FLOOR  
HIALEAH, FL 33010

**New Mailing Address:**

701 4TH STREET  
SUITE 101  
MIAMI BEACH, FL 33139

**FEI Number:** 59-1141235

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FOUR POINTS PROPERTY MANAGEMENT, INC.  
790 WEST 20TH STREET  
2ND FLOOR  
HIALEAH, FL 33010 US

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

REGATTA REAL ESTATE MANAGEMENT  
701 4TH STREET  
SUITE 101  
MIAMI BEACH, FL 33139 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: STACIE WARREN

02/03/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: D'AMURA, RICHARD  
Address: 1614 WEST AVE UNIT 506  
City-St-Zip: MIAMI BEACH, FL 33139

Title: V  
Name: SIMEON, MAGARIS JR  
Address: 1614 WEST AVE UNIT 606  
City-St-Zip: MIAMI BEACH, FL 33139

Title: T  
Name: TERESA, CRUISE  
Address: 1620 WEST AVE UNIT 201  
City-St-Zip: MIAMI BEACH, FL 33139

Title: S  
Name: ALBERT, DIAZ  
Address: 1620 WEST AVE UNIT 205  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D  
Name: MARIELA, FERNANDEZ  
Address: 1614 WEST AVE UNIT 502  
City-St-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: STACE WARREN, LCAM

MAN

02/03/2012

Electronic Signature of Signing Officer or Director

Date