

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90158 037 ****61.25

DOCUMENT # 710327

1. Entity Name

POINT EAST ONE CONDOMINIUM CORPORATION, INC.



Principal Place of Business

2895 POINT EAST DRIVE
AVENTURA FL 33160

Mailing Address

2895 POINT EAST DRIVE
AVENTURA FL 33160

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1281661

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

COHEN, MEL
2930 POINT EAST DRIVE
APT E402
AVENTURA FL 33160

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME DOMBROSKI, ROBERT
STREET ADDRESS 2980 POINT EAST DRIVE D-111
CITY-ST-ZIP AVENTURA FL 33160

TITLE ☐ Delete
NAME MARLENE, BOUGIE
STREET ADDRESS 2929 POINT EAST DRIVE A-301
CITY-ST-ZIP AVENTURA FL 33160

TITLE ☒ Delete
NAME FRANK, SHIRLEY A
STREET ADDRESS 2980 POINT EAST DRIVE D-307
CITY-ST-ZIP AVENTURA FL 33160

TITLE ☒ Delete
NAME GIBELLI, THERESA
STREET ADDRESS 2930 POINT EAST DR APT E 214
CITY-ST-ZIP AVENTURA FL 33160

TITLE ☐ Delete
NAME COHEN, MEL
STREET ADDRESS 2930 POINT EAST DR APT E 402
CITY-ST-ZIP AVENTURA FL 33160

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME *Treasurer*
STREET ADDRESS *Woods, ALAN*
CITY-ST-ZIP *2930 Point East Drive, Apt E-202*
Aventura, FL. 33160

TITLE ☐ Change ☒ Addition
NAME *Secretary*
STREET ADDRESS *Murphy, GRACE*
CITY-ST-ZIP *2929 Point East Drive, Apt A-314*
Aventura, FL. 33160

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

APRIL 26 2006 305 931 3960