## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT-(UBR)

## FILED May 08, 2003 8:00 am Secretary of State

1. Entity Nar	MENT # 710327 AST ONE CONDOMINIUM CO		)4-21-2003 9105	9 034 ***	·*61.25				
Principal Pla	ce of Business	Mailing Address				. 1			
2895 POINT EAST DRIVE AVENTURA FL 33160		2895 POINT EAST DRIVE AVENTURA FL 33160			55038734				
				1 13 <b>17</b> 113 1 <b>073</b> 1 21 <b>1</b> 113 <b>1</b>	0140 0110 1504 1001 0101 01	Ki <b>eni</b> n in <b>o</b> n ii	IN CHANTUM		
2. Principal	Place of Business	3. Mailing Address						<u> </u>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHE	CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. FEI Number 59-1	er <b>59-1281661</b> Applied Fo		<del></del>	7	
Zip	Country	Zip ·	Country	Certificate of Status	Desired	\$8.75 Add		1	
	6. Name and Address of Current I	Registered Agent	- <del> , ·</del>	7. Name and Addres	s of New Registered	Fee Require	<del>-</del>	-	
	1		Name	11					
ROHEN, MEL 2830 POINTE EAST DRIVE SUITE E-402			Street /	Street Address (P.O. Box Number is Not Acceptable)  2929 Point East Drive					
MIAMI FL 33160		•	A	Apt. A 301				1	
	•		City	Prentura	FL	Zip Cod	3/60	1	
	named entity submits this statement for tions of registered agent.	the purpose of changing its r			State of Florida. I am	familiar with,	and accept	1	
SIGNATURE	Harley Day or principled surper of reciplent of account	euje	Special area of Acases shows	rate societed when rejectated)	DATE		<del></del> -		
	FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund Co	entribution.	\$5.00 May Be Added to Fees	Make Checi Florida Depar	tment of S	State		
10.	OFFICERS AND DIR		11.	ADDITIONS/CHANGES 1	O OFFICERS AND DI			่ส	
TITLE Name	D Watson, Sidney A	☐ Delete	TITLE NAME			☐ Change	Addition	8	
STREET ADORESS	2930 POINT EAST DRIVE E-212		STREET ADDRESS					12	
CITY-ST-ZIP	MIAMI FL 33160		CITY-ST-ZIP					CR2E037 (10/02)	
TITLE	PD	Delete	TITLE	PRESIDENT .	13 100	☐ Change	Addition	3	
NAME	COHEN, MEL		NAME	Bougle, MAR 2929 Point East	iene ,				
STREET ADDRESS CITY-ST-ZIP	2930 POINT EAST DRIVE SUITE	102	STREET ADDRESS CITY-ST-ZIP	2929 Point GAST	DRIVE M-	201			
	AVENTURA FL.	Date	<b> </b>	Aventura, FR.	33/60		☐ Addition	┨	
name	FRANK, SHIRLEY A	Delete	INTLE NAME	ە. «سەن سەن داد	<del></del>	Change	MOGRAMIA .	-	
STREET ADDRESS	2980 POINT EAST DRIVE D-307		STREET ADDRESS						
CITY-ST-ZIP	AVENTURA FL 33160		CITY-ST-ZIP		0				
TITLE	VD	Delete:	. —TITLE,	والمجارية والمتحارض		Change آ_ت	Addition		
NAME	SZEKELY, EVA		NAME					ļ	
STREET ADDRESS CITY ST-ZIP	2999 POINT EAST DR., C-614	•	STREET ADDRESS CITY-ST-ZIP	,				1	
·· <del>···</del> ···	AVENTURA FL.	☐ Delete	<del></del>	DIRECTOR .	<del></del>	Change	Addition		
TITLE NAME	KAPLAN, SHIRLEY	LI UBIETE	NAME	KADINA Shiplan	. م	<b>™</b> ∧resifts		ĺ	
STREET ADDRESS	,		CTDCTT LODGECC	いてにアメハニッグ・ゴ	Daim A 3	09		(	
	2929 POINT EAST DR A-309		STREET ADDRESS	AGAG POINT PLACTI	UNUVE "				
CITY-ST-ZIP	2929 POINT EAST DR A-309 AVENTURA FL 33160		CITY-ST-ZIP	AVENTURA FR	- 33/60	, , ,			
CITY-ST-ZIP		☐ Delete	CITY-ST-ZIP	Kaplan, Shiplay agag Point Bast Aventura, Fl	33/60	☐ Change	☐ Addition		
		☐ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	AVENTURA, FL	33/60	☐ Change	Addition		

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 all other like empowered.

SIGNATURE:

CALLLE STORME OF BISHING OFFICER OF DIRECTOR

4/16/03 305-931-3960