

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 13, 2009
Secretary of State**

DOCUMENT# 710750

Entity Name: BROADWATER BEACH ARMS I, INC.

Current Principal Place of Business:

6490 COLLINS AVENUE
MIAMI BEACH, FL 33141

New Principal Place of Business:

6490 COLLINS AVENUE
12B
MIAMI BEACH, FL 33141

Current Mailing Address:

6490 COLLINS AVENUE
12B
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 59-0995649 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMOR, JOSE A
6490 COLLINS AV. APT. 12-B
MIAMI BEACH, FL 33141 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: PD () Delete
Name: NAVIA, SILVIA H
Address: 6490 COLLINS AVE #1
City-St-Zip: MIAMI, FL 33144

Title: VD () Delete
Name: HERNANDEZ, CARLOS
Address: 6490 COLLINS AVE APT H1
City-St-Zip: MIAMI BEACH, FL 33141

Title: SD () Delete
Name: AMOR, JOSE A
Address: 6490 COLLINS AVE APT 12-B
City-St-Zip: MIAMI BEACH, FL 33141

Title: S () Delete
Name: DIAZ, ENRIQUE
Address: 6490 COLLINS AVE APT 7
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: MACHADO, YOLANDA
Address: 6490 COLLINS AVE APT 15
City-St-Zip: MIAMI, FL 33141

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:

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: JOSE AMOR

SD

04/13/2009

Electronic Signature of Signing Officer or Director

Date