

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710750

FILED  
Feb 22, 2010  
Secretary of State

**Entity Name:** BROADWATER BEACH ARMS I, INC.

**Current Principal Place of Business:**

6490 COLLINS AVENUE  
12B  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

6490 COLLINS AVENUE  
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  
Name: DIAZ, GENOVEVA  
Address: 6490 COLLINS AVE #9  
City-St-Zip: MIAMI, FL 33144

Title: SD  
Name: ARAGONES, MARYBEL  
Address: 6490 COLLINS AVE APT 6  
City-St-Zip: MIAMI BEACH, FL 33141

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

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

Title: D  
Name: MENA, JUAN  
Address: 6490 COLLINS AVE APT 8  
City-St-Zip: MIAMI, FL 33141

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: JOSE A AMOR

T/RA

02/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date