

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 06, 2008  
Secretary of State**

DOCUMENT# 713432

Entity Name: 713 COLLINS CONDOMINIUM, INC.

**Current Principal Place of Business:**

713 COLLINS AVENUE  
APT #21  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

713 COLLINS AVENUE  
APT #21  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 59-1379861      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HICKEY, KEVIN  
8220 HAWTHORNE AVENUE  
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: MORALES, DALIO  
Address: 713 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD ( ) Delete  
Name: HICKEY, KEVIN  
Address: 8220 HAWTHORNE AVENUE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: TD ( ) Delete  
Name: SUTTON, PAMELA  
Address: 6061 COLLINS AVE #22F  
City-St-Zip: MIAMI BEACH, FL 33140

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: HICKEY, KEVIN  
Address: 8220 HAWTHORNE AVENUE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: SD (X) Change ( ) Addition  
Name: BEAUSEJOUR, DENIS  
Address: 713 COLLINS AVE #29  
City-St-Zip: MIAMI BEACH, FL 33139

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: DENIS BEAUSEJOUR

SD

04/06/2008

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

\_\_\_\_\_  
Date