

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 20, 2011  
Secretary of State**

DOCUMENT# 714233

Entity Name: 5 - 18 CONDOMINIUM, INC.

**Current Principal Place of Business:**

518 EUCLID AVENUE  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

518 EUCLID AVENUE  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 59-1502202      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HARCAVI, MARIA I  
518 EUCLID AVE.  
#2  
MIAMI BEACH, FL 33139 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: P  
Name: IGLESIAS, ROBERT  
Address: 518 EUCLID AVE., #5  
City-St-Zip: MIAMI BEACH, FL 33139

Title: T  
Name: ARIAS, MARIA  
Address: 518 EUCLID AVE #3  
City-St-Zip: MIAMI BEACH, FL 33139

Title: S  
Name: HARCAVI, MARIA I  
Address: 518 EUCLID AVE # 2  
City-St-Zip: MIAMI BEACH, FL 33139

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: MARIA I HARCAVI

S

04/20/2011

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

\_\_\_\_\_ Date