2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2009
Secretary of State

DOCUMENT# 714665

Entity Name: BROADWATER BEACH ARMS, III, INC.

Current Principal Place of Business:

6498 COLLINS AVENUE
UNIT 37
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

6498 COLLINS AVENUE
UNIT 37
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 59-0995650 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUINTANA, SUSANA
6498 COLLINS AVE. #37
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:	MARTIN, VICENTE	
Address:	6498 COLLINS AVE APT 54	
City-St-Zip:	MIAMI BEACH, FL 33141	
Title:	VPD	( ) Delete
Name:	RUIZ, FRANCISCO	
Address:	5500 SW 147 PL	
City-St-Zip:	MIAMI, FL 33185	
Title:	TD	( ) Delete
Name:	QUINTANA, SUSANA	
Address:	6498 COLLINS AVE UNIT #37	
City-St-Zip:	MIAMI BEACH, FL 33141	
Title:	SD	( ) Delete
Name:	MARTINEZ-FUMERO, SONIA	
Address:	240 SW 15 RD. #101	
City-St-Zip:	MIAMI, FL 33129	
Title:	ATS	( ) Delete
Name:	MARTIN, YSABEL	
Address:	6498 COLLINS AVE APT 54	
City-St-Zip:	MIAMI BEACH, FL 33141	
Title:	AVP	( ) Delete
Name:	VALLADARES, CARLOS	
Address:	11885 SW 43 ST.	
City-St-Zip:	MIAMI, FL 33175	

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:	SD	(X) Change ( ) Addition
Name:	MARTINEZ-FUMERO, CATALINA	
Address:	240 SW 15 RD. #101	
City-St-Zip:	MIAMI, FL 33129	
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: FRANCISCO RUIZ VP 04/05/2009

Electronic Signature of Signing Officer or Director — Date