
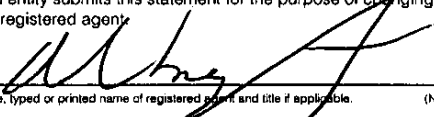


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90394 020 ****61.25

DOCUMENT # 716972			
1. Entity Name LAKE PARK CONDOMINIUM I, INC.			
Principal Place of Business 900 N.E. 199TH ST NORTH MIAMI BEACH, FL 33179-3009		Mailing Address 900 N.E. 199TH ST NORTH MIAMI BEACH, FL 33179-3009	
2. Principal Place of Business		3. Mailing Address 2035 Harding Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 200	
City & State		City & State Hollywood, FL	
Zip	Country	Zip	Country
33020	USA	33020	USA
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
PERLMAN, MARK 1820 E HALLANDALE BEACH BLVD HALLANDALE, FL 33009		Name Andrew Meyrowitz	
		Street Address (P.O. Box Number is Not Acceptable) DCI Association Services	
		2035 Harding Street - Suite 200	
		Hollywood FL 33020	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE 4/14/06	
Filing Fee is \$81.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD	TITLE	President
NAME	JAOQS, LEO	NAME	George Alexander
STREET ADDRESS	920 NE 199 ST, #115	STREET ADDRESS	942 NE 199th St. #407
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	CITY-ST-ZIP	N.M.B., FL 33179
TITLE	VPD	TITLE	V-President
NAME	KLAPPERT, PEARL	NAME	Isidro Zamudio
STREET ADDRESS	952 NE 199 ST, #144	STREET ADDRESS	950 NE 199th ST. @ 307
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	CITY-ST-ZIP	N.M.B. FL 33179
TITLE	SD	TITLE	Treas.
NAME	PHETERSON, GWEN	NAME	Gwen Pheterson
STREET ADDRESS	920 NE 199 ST, #314	STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	CITY-ST-ZIP	
TITLE	SD	TITLE	
NAME	ITZKOWITZ, HERMAN	NAME	
STREET ADDRESS	952 NE 199 ST, #211	STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	CITY-ST-ZIP	
TITLE	BMD	TITLE	BMD
NAME	WOLFSTEIN, MILDRED	NAME	Linda Tillman
STREET ADDRESS	920 NE 199 ST #217	STREET ADDRESS	920 NE 199 St. #416
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	CITY-ST-ZIP	NMB, FL 33179
TITLE	BMD	TITLE	BMD
NAME	HARMON, FRANCES	NAME	Martin Levine
STREET ADDRESS	952 NE 199ST #411	STREET ADDRESS	942 NE 199th SR #307
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179	CITY-ST-ZIP	N.M.B., FL 33179
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date: 4-18-06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

40057457

