

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717423

FILED
Apr 04, 2007
Secretary of State

Entity Name: TERRACE VIEW TOWERS, INC.

Current Principal Place of Business:

240 COLLINS AVENUE
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

TERRACE VIEW TOWERS
240 COLLINS AVE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 59-1426522 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CRISTANCHO, PETER
240 COLLINS AVENUE
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: BM () Delete
Name: HILDA, MARQUEZ
Address: 240 COLLINS AVE #4C
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: WILLIAM, MEDELLIN
Address: 240 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD () Delete
Name: JUOZUNAS, SOPHIA,
Address: 240 COLLINS AVE. #5E
City-St-Zip: MIAMI BEACH, FL 33139

Title: P () Delete
Name: CRISTANCHO, PETER
Address: 240 COLLINS AVE. #4D
City-St-Zip: MIAMI BCH., FL 33139

Title: D () Delete
Name: ANDRIS, JR., LOUIS
Address: 240 COLLINS AVE. #2F
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SCOTT, IAN
Address: 240 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33139

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: D () Change (X) Addition
Name: HONIG, ELEANOR
Address: 240 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER CRISTANCHO

P

04/04/2007

Electronic Signature of Signing Officer or Director

Date