

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717471

FILED
Jan 26, 2009
Secretary of State

Entity Name: 600 MICHIGAN CONDOMINIUM, INC.

Current Principal Place of Business:

600 MICHIGAN AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

7900 NW 155TH STREET
SUITE 205
MIAMI LAKES, FL 33016

New Mailing Address:

600 MICHIGAN AVENUE
MIAMI BEACH, FL 33139

FEI Number: 59-2060763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALESPEITI, GABRIEL
1007 6TH STREET
APT #5
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: PATD () Delete
Name: ALESPEITI, DAPHNE
Address: 600 MICHIGAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: TSD () Delete
Name: ALESPEITI, GABRIEL
Address: 600 MICHIGAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: MARTINEZ, DORA
Address: 600 MICHIGAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VASD () Delete
Name: TIVET, DANIEL
Address: 600 MICHIGAN AVENUE
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: () 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: HUGHES, MICHAEL
Address: 600 MICHIGAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

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: GABRIEL ALESPEITI

TSD

01/26/2009

Electronic Signature of Signing Officer or Director

Date