

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 8:00 am
Secretary of State

01-18-2005 90059 003 ****61.25

DOCUMENT # 717860 1. Entity Name BAYSHORE PLACE CONDOMINIUM, INC.					
Principal Place of Business 1420 BRICKELL BAY DR MIAMI, FL 33131 US			Mailing Address 1420 BRICKELL BAY DR MIAMI, FL 33131 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1475007	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
ZAMORA, NELLY 1420 BRICKELL BAY DR MIAMI, FL 33131			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$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	DP	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	FREEMAN, LARRY		NAME		
STREET ADDRESS	1420 BRICKELL BAY DR		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP		
TITLE	DT	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	CARDENAL, MAURICIO		NAME	JUAN C. MORALES	
STREET ADDRESS	1420 BRICKELL BAY DR		STREET ADDRESS	1420 BRICKELL BAY DR	
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	DS	☐ Delete	TITLE	☒ Change ☐ Addition	
NAME	COOMSS, MARY		NAME	MARY COOMBS	
STREET ADDRESS	1420 BRICKELL BAY DR		STREET ADDRESS	1420 BRICKELL BAY DR	
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	DVP	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	PUIG, BAUTISTA		NAME	FERNANDO FIGUEROA	
STREET ADDRESS	1420 BRICKELL BAY DRIVE		STREET ADDRESS	1420 BRICKELL BAY DR	
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	D	☐ Delete	TITLE	☐ Change ☒ Addition	
NAME	ZORIO, MARTIN		NAME	MAX SILVER	
STREET ADDRESS	1420 BRICKELL BAY DR.		STREET ADDRESS	1420 BRICKELL BAY DR	
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	VENEGAS, MARISA		NAME		
STREET ADDRESS	1420 BRICKELL BAY DR		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			01/12/2005 305-373-5987 Date Daytime Phone #		