

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90108 034 ****61.25

DOCUMENT # 718006 1. Entity Name STRAND PLAZA ASSOCIATION, INC.			
Principal Place of Business 421 NE 1 STREET HALLANDALE, FL 33009		Mailing Address C/O DCI, 2035 HARDING ST SUITE 200 HOLLYWOOD, FL 33020	
2. Principal Place of Business - (No P.O. Box #) Suite, Apt. #, etc.		3. Mailing Address 421 ne 1 street Suite, Apt. #, etc.	
City & State Zip		City & State Hallandale Beach FL Zip 33009	
Country		Country Broward.	
4. FEI Number 59-1449417		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MEYROWITZ, ANDREW C/O DCI 2035 HARDING ST #200 HOLLYWOOD, FL 33020		7. Name and Address of New Registered Agent Name Becker & Poliakoff, P.A. Street Address (P.O. Box Number is Not Acceptable) Gary A. Poliakoff, President 3111 Stirling Road City Ft Lauderdale FL Zip Code 33312-6525	
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, type or printed name of registered agent and title if applicable.		DATE 3/24/08 (NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$81.25 Due by May 1, 2008		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 NAME STREET ADDRESS CITY-ST-ZIP	P RUBIO, ADRIANA ☒ Delete 1385 MAJESTY TERRACE WESTON, FL 33327	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DORIAN Hernandez, President ☐ Change ☒ Addition 421 ne 1 street # 113 Hallandale Beach FL 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HERNANDEZ, DORIAN ☒ Delete 421 NE 1ST ST. #113 HALLANDALE, FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer ☐ Change ☒ Addition Peggy oneill 421 ne 1 street #119 Hallandale Beach, FL 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MORFFI, MIRIAM ☒ Delete 421 NE 1ST ST #103 HALLANDALE, FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	secretary ☒ Change ☒ Addition Miriam morffi 421 ne 1 street #103 Hallandale Beach FL 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LOPEZ, SANDRA ☒ Delete 421 NE 1ST ST #102 HALLANDALE BEACH, FL 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	vice president ☒ Change ☐ Addition nancy viccars 343 walsh ave newington, CT 06111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VICCARO, NANCY ☐ Delete 343 WALSH AVE NEWINGTON, CT 06111	TITLE NAME STREET ADDRESS CITY-ST-ZIP	director ☐ Change ☒ Addition daniel perez 421 ne 1 street # 108 Hallandale Beach FL 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 4/2/08 Daytime Phone # 3054589191	

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