


**FILED**  
**Mar 06, 1999 8:00 am**  
**Secretary of State**

03-06-1999 90022 034 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 719324**

1. Corporation Name  
**FIFTY SIX SIXTY COLLINS AVE. CONDOMINIUM, INC.**

272932-90122-50

Principal Place of Business 5660 COLLINS AVE. MIAMI BEACH FL 33140 US	Mailing Address 5660 COLLINS AVE. MIAMI FL 33140 US
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2. Principal Place of Business 21	2a. Mailing Address 28	3. Date Incorporated or Qualified 09/16/1970
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1310100
City & State 23	City & State 28	Applied For Not Applicable
Zip 24	Country 25	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Country 25	Zip 29	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent  MILLER, PHYLLIS 5660 COLLINS AVENUE MIAMI BEACH FL 33140	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KRAMER, ROSE 5660 COLLINS AVE. 5A MIAMI BCH, FL 00000 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CETLIN, EDWARD 5660 COLLIND AV., 11D MIAMI BCH, FL 00000 <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	1st VP CETLIN, EDWARD 5660 COLLINS AVE. 11D MIAMI BEACH, FL. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP REKANT, KENNETH 5660 COLLINS AVE., 15E MIAMI BEACH FL <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	2nd VP BUSTAMANTE, ARTURO 5660 COLLINS AVE, 10B <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO RADIN, IRVING 5660 COLLINS AVE. 12A MIAMI BCH, FL 00000 <input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	SEC UFFNER, JEROME 5660 COLLINS AVE. 7C MIAMI BEACH, FL. 33140 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MILLER, PHYLLIS 5660 COLLINS AVE. 18C MIAMI BCH, FL 00000 <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edina SIGNATURE REQUIRED 2/16/99 (305) 531-5460  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)

**fifty six sixty**

COLLINS AVENUE  
CONDOMINIUM, INC.

MIAMI BEACH, FLORIDA 33140 •

272932-90122-50

719824

1999 BOARD OF DIRECTORS

PRESIDENT

PHYLIS MILLER  
5660 COLLINS AVE. 18C  
MIAMI BEACH, FL. 33140

SECRETARY

JEROME UFFNER  
~~5660 COLLINS AVE. - 7C~~  
MIAMI BEACH, FL. 33140

TREASURER

ROSE KRAMER  
5660 COLLINS AVE. - 5A  
MIAMI BEACH, FL. 33140

1st V. P.

EDWARD CETLIN  
5660 COLLINS AVE. - 11D  
MIAMI BEACH, FL. 33140

2nd V.P.

ARTURO BUSTAMANTE  
5660 COLLINS AVE. - 10B  
MIAMI BEACH, FL. 33140