

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719324

FILED
Jan 05, 2005
Secretary of State

Entity Name: FIFTY SIX SIXTY COLLINS AVE. CONDOMINIUM, INC.

Current Principal Place of Business:

5660 COLLINS AVE.
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

5660 COLLINS AVE.
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 59-1310100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UFFNER, JEROME
5660 COLLINS AVENUE
MIAMI BEACH, FL 33140 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: SEC () Delete
Name: POTASHNICK, JEROME
Address: 5660 COLLINS AVE. 8A
City-St-Zip: MIAMI BEACH, FL 33140

Title: 2VPD () Delete
Name: BREUER, ADRIENNE
Address: 5660 COLLINS AVE. 10-A
City-St-Zip: MIAMI BEACH, FL 33140

Title: TREA () Delete
Name: BUSTAMANTE, ARTURO TREAS
Address: 5660 COLLINS AVE, 10B
City-St-Zip: MIAMI BEACH, FL 33140

Title: P () Delete
Name: UFFNER, JEROME PRESIDE
Address: 5660 COLLINS AVE, 7C
City-St-Zip: MIAMI BEACH, FL 33140

Title: 1 VP () Delete
Name: GETZ, MORTON 1 VP
Address: 5660 COLLINS AVE. 9-D
City-St-Zip: MIAMI BCH, FL 33140

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HARRY GARFINKLE

MANA

01/05/2005

Electronic Signature of Signing Officer or Director

Date