

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720299

FILED
Mar 02, 2011
Secretary of State

Entity Name: BELLE TOWERS CONDOMINIUM, INC.

Current Principal Place of Business:

16 ISLAND AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

16 ISLAND AVE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 59-1346862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, WINTER PRES
16 ISLAND AVENUE
8A
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: T
Name: FARBER, HOWARD
Address: 16 ISLAND AVE # 2A
City-St-Zip: MIAMI BEACH, FL 33139

Title: D
Name: FEINBERG, NORMAN
Address: 16 ISLAND AVE #7A
City-St-Zip: MIAMI BEACH, FL 33139

Title: D
Name: PIPERATO, JOSEPH
Address: 16 ISLAND AVE #3C
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP
Name: KLAU, CAROL
Address: 16 ISLAND AVE # 7C
City-St-Zip: MIAMI BEACH, FL 33139

Title: P
Name: WINTER, SCOTT
Address: 16 ISLAND AVENUE 8A
City-St-Zip: MIAMI BEACH, FL 33139

Title: S
Name: POWELL, MINDY
Address: 16 ISLAND AVE #4C
City-St-Zip: MIAMI BEACH, FL 33139

I hereby 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 all other like empowered.

SIGNATURE: SCOTT WINTER

P

03/02/2011

Electronic Signature of Signing Officer or Director

Date

720299
3-211

BELLE TOWERS CONDOMINIUM, INC.

FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
RE INSTATEMENT DEPT	MARLON CRUZ
COMPANY:	DATE:
DIV OF CORPORATIONS	03-11-2011
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
850-245-6017	2
PHONE NUMBER:	OFFICE NUMBER:
	305-538-5418
RE:	FAX NUMBER:
Document#720299	305-534-1828

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

RE: DOCUMENT NUMBER 720299

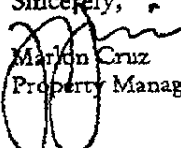
To Whom It May Concern:

I recently filed our annual reporting (conf#200196542742); but I was only able to register up to 6 of the 7 Board Members via online.

Please add the 7th member I am disclosing below:

Title: Director
Name: Joseph Rokacz
Address: 16 Island Ave #8E Miami Beach FL 33139
Mailing/Forwarding Address: 400 West End Ave Suite 10C NY, NY 10024

Sincerely,


Marlon Cruz
Property Manager