

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725156

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** BAYSWATER COURT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2935 NE 163 ST.  
NO. MIAMI BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

J & M CONDO MANAGEMENT & MAINT., INC.  
275 FOUNTAINBLEAU BLVD., SUITE 200  
MIAMI, FL 33172

**New Mailing Address:**

**FEI Number:** 59-1532837      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FEIN, STEVEN A P.A.  
900 SO. STATE RD. 7  
PLANTATION, FL 33317      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: VD      ( ) Delete  
Name: PEREZ, SILVERIO  
Address: 275 FONTAINEBLEAU BLVD #200  
City-St-Zip: MIAMI, FL 33172

Title: D      ( ) Delete  
Name: MONCARZ, ABRAHAM  
Address: 275 FONTAINEBLEAU BLVD #200  
City-St-Zip: MIAMI, FL 33172

Title: PD      ( ) Delete  
Name: HOSTOS, CARLOS  
Address: 275 FONTAINEBLEAU BLVD #200  
City-St-Zip: MIAMI, FL 33172

Title: D      ( ) Delete  
Name: CABEZAS, SAMUEL  
Address: 275 FONTAINEBLEAU BLVD #200  
City-St-Zip: MIAMI, FL 33172

Title: SD      ( ) Delete  
Name: GARCIA, ALEJANDRO  
Address: 275 FONTAINEBLEAU BLVD.  
City-St-Zip: MIAMI, FL 33172 US

Title: D      ( ) Delete  
Name: MONTERO, JON  
Address: 275 FONTAINEBLEAU BLVD  
City-St-Zip: MIAMI, FL 33172

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CARLOS HOSTOS

PD

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date