

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2004 8:00 am
Secretary of State

02-18-2004 90002 018 ****61.25

DOCUMENT # 725460	
1. Entity Name ARLEN BEACH CONDOMINIUM ASSOCIATION INC	

Principal Place of Business 5701 COLLINS AVENUE MIAMI BEACH FL 33140-2353	Mailing Address 5701 COLLINS AVENUE MIAMI BEACH FL 33140-2353
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

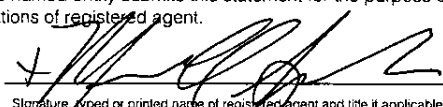


MOORE CR2E037 (11/03)

4. FEI Number 13-2776634	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SPIVAK, MERRIL 5701 COLLINS AVE C/O ARLEN BEACH CONDO ASSOC. MIAMI BEACH FL 33140	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 	DATE 2/9/04
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BAEZ, JESUS J JR 5701 COLLINS AVENUE MIAMI BEACH FL 33140-2353 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALVAREZ, FRANK 5701 COLLINS AVENUE MIAMI BEACH FL 33140-2353 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RODRIGUEZ-CHOMAT, JORGE 5701 COLLINS AVENUE MIAMI BEACH FL 33140-2353 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KRAMER, STEVEN M 5701 COLLINS AVE, #719 MIAMI BEACH FL 33140-2353 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAVARRO, GILBERTO 5701 COLLINS AVENUE MIAMI BEACH FL 33140-2353 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASFERRER, ROLANDO 5701 COLLINS AVENUE MIAMI BEACH FL 33140-2353 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Humberto Rodriguez, Pres 5701 Collins Ave. Miami Bch. FL. ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Carlos Rodriguez, TRE 5701 Collins Ave. Miami Bch. FL. 3 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hellis Miido, Sec 5701 Collins Ave. Miami Bch ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jordan Conn, DR. 5701 Collins Ave Miami Bch ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELIOSA menes, DR 5701 Collins Ave. Miami Bch ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Justo Gomez, DR. 5701 Collins Ave. Miami Bch ☐ Change ☒ Addition

12. 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 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: 	DATE 2/9/04	Daytime Phone #
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		