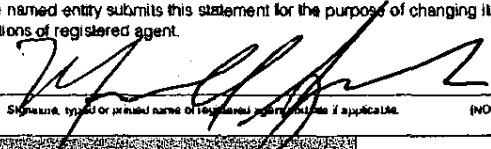
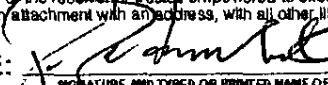


2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

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	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		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 VELO, SR., FABIAN 5701 COLLINS AVE MANAGERS OFFICE MIAMI BEACH, FL 33140		7. Name and Address of New Registered Agent Name MERRILL SPINAK Street Address (P.O. Box Number is Not Acceptable) 90 ARLEN BEACH CONDO. ASSN 5701 COLLINS AVE City MIAMI BEACH FL Zip Code 33140	
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 5/27/03 (NOTE: Registered Agent's signature required when reinstating)			
FILE NOW - FEES \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT BAEZ, JESUS J JR 5701 COLLINS AVENUE MIAMI BEACH, FL 331402363 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES. FRANK ALVAREZ 5701 COLLINS AVE MIAMI BEACH FL 33140 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CRUZ, JUAN J 5701 COLLINS AVENUE MIAMI BEACH, FL 331402363 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	F JORGE RODRIGUEZ-CHOMAT 5701 COLLINS AVE MIAMI BEACH FL 33140 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COHN, JORDAN J 5701 COLLINS AVENUE MIAMI BEACH, FL 331402363 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEVEN M. KRAMER 5701 COLLINS AVE MIAMI BEACH FL 33140 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOMEZ, JOSTO E 5701 COLLINS AVE, #719 MIAMI BEACH, FL 331402363 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILBERTO NAVARRO 5701 COLLINS AVE MIAMI BEACH FL 33140 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PENER, KATHERINE 5701 COLLINS AVENUE MIAMI BEACH, FL 331402363 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	R ROBERT MINDLIN 5701 COLLINS AVE MIAMI BEACH FL 33140 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR MASFERRER, ROLANDO 5701 COLLINS AVENUE MIAMI BEACH, FL 331402363 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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:  Jorge Rodriguez-Chomat, Treasurer		Date 5/27/03 Daytime Phone #	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

CR2E037 (10/02)