

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725763

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: IMPERIAL HOUSE CONDOMINIUM, INC.

## Current Principal Place of Business:

5255 COLLINS AVE.  
MIAMI BEACH, FL 33140

## New Principal Place of Business:

## Current Mailing Address:

5255 COLLINS AVE.  
MIAMI BEACH, FL 33140

## New Mailing Address:

FEI Number: 59-1552004

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

LOWY, RONALD  
1041 IVES DAIRY ROAD  
238  
MIAMI, FL 33179 US

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: RONALD LOWY

04/08/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DE GASPERI, ALEX  
Address: 5255 COLLINS AVE.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: V ( ) Delete  
Name: TALLENT, STEVEN  
Address: 5255 COLLINS AVE.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: S ( ) Delete  
Name: PELLERIN, MICHAEL  
Address: 5255 COLLINS AVE.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: T ( ) Delete  
Name: WRIGHT, CHRIS  
Address: 5255 COLLINS AVE.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete  
Name: SCHIMEL, MARLENA  
Address: 5255 COLLINS AVE.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D (X) Delete  
Name: FRIDMAN, CHARLES  
Address: 5255 COLLINS AVE.  
City-St-Zip: MIAMI BEACH, 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: S (X) Change ( ) Addition  
Name: PLOTNER, KEVIN  
Address: 5255 COLLINS AVE.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: T (X) Change ( ) Addition  
Name: SHIMMEL, MARLENE  
Address: 5255 COLLINS AVE.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D (X) Change ( ) Addition  
Name: KEUSCH, ANN  
Address: 5255 COLLINS AVE.  
City-St-Zip: MIAMI BEACH, FL 33140

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: ALEX DE GASPERI

P

04/08/2009

Electronic Signature of Signing Officer or Director

Date