


2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 20, 2007 08:00 A
Secretary of State


DOCUMENT # 755549

1. Entity Name
COLLINS PLAZA CONDOMINIUM ASSOC. INC.



| | |
|---|---|
| Principal Place of Business 12460 SW 8 STREET SUITE 202 MIAMI, FL 33184 US | Mailing Address 12460 SW 8 STREET SUITE 202 MIAMI, FL 33184 US |
|---|---|

DO NOT WRITE IN THIS SPACE



04132007 No Chg-NP CR2E037 (4/06)

| | |
|---|--------------------------------|
| 4. FEI Number 59-2389846 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

MORAN, TAMARA
12460 SW 8 STREET
SUITE 202
MIAMI, FL 33184

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD SHANER, EMMA 1334 COLLINS AVE MIAMI BCH, FL 33139 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD RIFA, ANTONIO 1334 COLLINS AVENUE 501 MIAMI, FL 33139 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD BORBOLLA, ELIZABETH 1331 COLLINS AVE #303 MIAMI BEACH, FL 33139 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SUAREZ SUAREZ , CARLOS 1334 COLLINS AVE #204 MIAMI BEACH, FL 33139 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD GRAY, TIM 1334 COLLINS AVE #404 MIAMI BEACH, FL 33139 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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05/01/07-80106-006-61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Emma N. Shaner, President 4/15/07 305-753-4438
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #