

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2004 08:00 AM
Secretary of State

DOCUMENT # 756425	
1. Entity Name TAMIAMI AIRPORT WAREHOUSES CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 13901 SW 140 STREET MIAMI, FL 33186	Mailing Address 13901 SW 140 STREET MIAMI, FL 33186
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DO NOT WRITE IN THIS SPACE



03032004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2511153	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SIMS, LINDA C 13901 SW 140 STREET MIAMI, FL 33186	DO NOT WRITE IN THIS SPACE
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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.

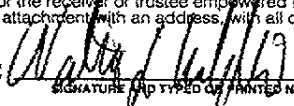
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000092194 03/18/04-80040-001 70.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STEINBRING, STEVE 13953 SW 140 ST. MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SIMS, LINDA C 13901 S W 140 STREET MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONNELLY, DAVE 13973 SW 140 ST MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMS, MILTON 13965 SW 140 STREET MIAMI, FL 33136
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KOLOMYSKI, WALTER 13959 S. W. 140TH ST. MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRUZ, JAVIER 13965 SW 140 STREET MIAMI, FL 33186

DO NOT WRITE
IN THIS SPACE

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:  WALTER K. KOLOMYSKI	Date 3-09-04	Daytime Phone # 305-257-4488
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