

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 07, 2008 08:00 AM
Secretary of State**

DOCUMENT # 757110

1. Entity Name
**TAMIAIR INDUSTRIAL CONDOMINIUM ASSOCIATION,
INC.**



Principal Place of Business
**14055 SOUTHWEST 142ND AVE., UNIT 16
MIAMI, FL 33186-6739**

Mailing Address
**14055 SOUTHWEST 142ND AVE UNIT 40
MIAMI, FL 33186-6739**



01042008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2106285

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SMITH, GLEN E.
7357 WEST FLAGLER STREET
MIAMI, FL 33144**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

**9. Election Campaign Financing
Trust Fund Contribution.** ☐

**\$5.00 May Be
Added to Fees**

**000000775351
01/08/08-80026-019 61.25**

10. OFFICERS AND DIRECTORS

| | |
|-----------------------|-------------------------------|
| TITLE | PD |
| NAME | CARANGI, LEON T JR |
| STREET ADDRESS | 10861 SW 108TH ST |
| CITY-ST-ZIP | MIAMI, FL 33178 |
| TITLE | VD |
| NAME | ELALOUF, VICTOR |
| STREET ADDRESS | 15560 SW 111 TERRACE |
| CITY-ST-ZIP | MIAMI, FL 33198 |
| TITLE | SD |
| NAME | DOUGHTY, LORRAINE |
| STREET ADDRESS | 7315 SW 137 AVE |
| CITY-ST-ZIP | MIAMI, FL 33183 |
| TITLE | D |
| NAME | FELDMAN, GREGOR |
| STREET ADDRESS | 14055 S.W. 142 AVE #10 |
| CITY-ST-ZIP | MIAMI, FL 33186 |
| TITLE | TD |
| NAME | LEE, ELEANOR |
| STREET ADDRESS | 13360 SW 99 TERR |
| CITY-ST-ZIP | MIAMI, FL 33186 |
| TITLE | D |
| NAME | RAMOS, MARGARITA |
| STREET ADDRESS | 9321 SW 104 AVE |
| CITY-ST-ZIP | MIAMI, FL 33178 |

**DO NOT WRITE
IN THIS SPACE**

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: Leon T. Carangi Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-08 305-233-7222

Date

Daytime Phone #