


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 8:00 am**  
**Secretary of State**

01-17-2006 90233 009 \*\*\*\*61.25

<b>DOCUMENT # 768653</b>			
1. Entity Name BIRD INDUSTRIAL CONDOMINIUMS ASSOCIATION, INC.			
Principal Place of Business 4240-70 SW 73RD AVE MIAMI, FL 33155 US		Mailing Address 1717 N BAYSHORE DR APT 3655 MIAMI, FL 33132 US	
2. Principal Place of Business		3. Mailing Address 3201 N.E. 183 <sup>rd</sup> ST.	
Suite, Apt. #, etc.		Suite, Apt. #, etc. #704	
City & State		City & State AVENTURA FL	
Zip	Country	Zip	Country
33160	USA	33160	USA
4. FEI Number 59-2350367		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BERG, ESTELLE 1717 N BAYSHORE DRIVE APT #3655 MIAMI, FL 33132		Name ESTELLE BERG	
		Street Address (P.O. Box Number is Not Acceptable) 3201 N.E. 183 <sup>rd</sup> ST.	
		#704	
		City AVENTURA FL Zip Code 33160	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	P BERG, PAUL 1717 N BAYSHORE DRIVE #3655 MIAMI, FL 33132 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BERG, PAUL 3201 NE 183 ST #704 AVENTURA FL 33160 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BERG, ESTELLE 1717 N BAYSHORE DR #3655 MIAMI, FL 33132 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BERG, ESTELLE 3201 NE 183 ST #704 AVENTURA, FL 33160 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENKEL, DENNIS 4268 SW 73RD. AVENUE MIAMI, FL 33155 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WONG, VICTOR 4260 SW 73RD AVE MIAMI, FL 33155 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WONG, VICTOR 2950 S.W. 27 AVE, STE 310 MIAMI FL 33133 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHULTZ, MARK 4240 S.W. 73RD AVENUE MIAMI, FL 33155 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARK, SCHULTZ 6010 SW 98 ST MIAMI FL 33156 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, ROLANDO 4240 S.W. 73 AVENUE MIAMI, FL 33155 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, ROLANDO 4246-48 SW 73 AVE MIAMI FL 33155 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u>Estelle Berg</u> ESTELLE BERG		Date	1-12-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	305-932-3503