

2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90083 027 ****61.25

DOCUMENT # 769746

1. Entity Name
PARK CENTRAL OWNERS ASSOCIATION, INC.



Principal Place of Business
**2875 N.E. 191ST ST
PENTHOUSE 1B
MIAMI, FL 33180 US**

Mailing Address
**2875 N.E. 191ST ST
PENTHOUSE 1B
MIAMI, FL 33180 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01042006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2378666

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KLEIN, ATTY THEODORE
88 NE 168TH STREET
NORTH MIAMI BEACH, FL 33162**

7. Name and Address of New Registered Agent

Name **Klein, Theodore S.**
Street Address (P.O. Box Number is Not Acceptable) **8030 Peters Road**
Suite D-104
City **Plantation** FL Zip Code **33329**

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 reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	SREDNI, ERWIN	
STREET ADDRESS	2875 NE 191ST ST, PH-1	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE	DVP	<input type="checkbox"/> Delete
NAME	SREDNI, ISAAC	
STREET ADDRESS	2875 NE 191ST STREET, PH-1	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE	DS	<input type="checkbox"/> Delete
NAME	AZOUT, JACK	
STREET ADDRESS	2875 NE 191ST STREET, PH-1	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE	DT	<input type="checkbox"/> Delete
NAME	GILINSKI, SAUL	
STREET ADDRESS	2875 N.E. 191 STREET, PH1	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #