


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 23, 2007 8:00 am
Secretary of State

01-23-2007 90017 002 ****61.25

DOCUMENT # **N00000001190**

1. Entity Name
Cloisters on the Bay Condominium Association, Inc.



DO NOT WRITE IN THIS SPACE

60004925

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3471 Main Hwy Suite, Apt. #, etc.		3. Mailing Address 11981 SW 144th Court Suite, Apt. #, etc. Suite # 201		4. FEI Number 90-0050740	Applied For <input type="checkbox"/> Not Applicable
City & State Coconut Grove, Fl.		City & State Miami, Fl.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33133	Country Date	Zip 33186	Country Date		

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name **Jay Ziskind**

Street Address (P.O. Box Number is Not Acceptable)
3471 Main Hwy. #517

City **Coconut Grove, Fl.** **FL** Zip Code **33133**

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  **Jay Ziskind - Board President** **01-11-07**
DATE

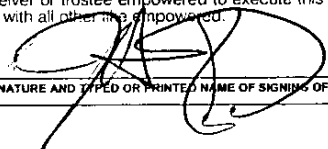
FEE IS \$61.25
Initial or Amended UBR

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 NAME STREET ADDRESS CITY-ST-ZIP	President, Jay Ziskind 3471 Main Hwy. #517 Coconut Grove, Fl. 33133	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President, Bernard Wolfson 3471 Main Hwy. #929 Coconut Grove, Fl. 33133	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary - Treasurer, Elaine Katz 3471 Main Hwy. #727 Coconut Grove, Fl. 33133	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	


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 on an attachment with an address, with all other information empowered.

SIGNATURE:  **Jay Ziskind** **01-11-07** **(305) 445-0009**
DATE Daytime Phone #

CR2E037B (12/02)

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #
1. Entity Name
Cloisters on the Bay Condominium Association, Inc.



ATTACHMENT
L0004925
N06000061190

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Cloisters on the Bay Condominium A

3. Mailing Address
3471 Main Hwy.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Coconut Grove, Fl.

City & State

Zip
33133

Country
Dade

Zip
Country

4. FEI Number **900050740** Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name **Jay Ziskind**

Street Address (P.O. Box Number is Not Acceptable)
3471 Main Hwy. #517

City **Coconut Grove** **FL** Zip Code **33133**

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  **Jay Ziskind - Board President** **11-27-06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering.) DATE

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

PEE IS \$81.25 Initial or Amended UBR **Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS	
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SIGNATURE:  **Jay Ziskind** **11-27-06** **(305)**

SIGNATURE OR TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

60004925
N00000001190

CLOISTERS ON THE BAY CONDO ASSOC., INC.

DEPT09 FLORIDA DEPT. OF STATE

Invoice Number	Invoice Date	Voucher	Entity	Account	Paid Amount
606A00065315	11/06/2006	92177	0149 CLOISTERS ON TH	50050 00 N00000001190	\$61.25
	11/08/2006		Check OPR1 1482		\$61.25

SECTION OF CLOISTERS ON THE BAY CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N00000001190

NOV 14 2006
P.Y.

Please be advised, we have received your request to file an amended annual report for the above corporation; however, the document has not been filed and is being returned for the following: