2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004004

City-St-Zip: MIAMI, FL 33136

Entity Name: 1551 CONDOMINIUM ASSOCIATION, INC.

FILED Jul 01, 2004 Secretary of State

•			,				
Current Principal Place of Business:				New Principal Place of Business:			
1551 LEN	OX AVE						
#2 MIAMI BEA	ACH, FL 3313	9					
Current Mailing Address:				New Mailing Address:			
1551 LENG	OX AVE				_		
#2		0					
MIAMI BEA	ACH, FL 3313	9					
FEI Number	: 65-1114540	FEI Number Applied For ()	FEI Num	ber Not App	licable ()	Certificate of Status Des	sired ()
Name and	l Address of (Current Registered Agent	:	Name and	Address of	New Registered Agen	t:
PILIBOSIAN, GEORGE 1551 LENOX AVE #7				BAUTISTA-HARDMAN, SHUMAYA 1551 LENOX AVE #2			
MIAMI BEACH, FL 33139 US				MIAMI BEACH, FL 33139 US			
	e named entity e of Florida.	submits this statement for t	he purpose of	changing i	ts registered	office or registered agei	nt, or both,
SIGNATURE: SHUMAYA BAUTISTA-HARDMAN						07/01/2004	
	Electron	nic Signature of Registered	Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D (PILIBOSION, G 1551 LENOX A MIAMI BEACH,	VE. #7		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	,			Title: Name: Address: City-St-Zip:	,		
Title: Name: Address: City-St-Zip:	TRIGG-COLLIN 1551 LENOX A MIAMI BEACH,	VE #8 FL 33139		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	AT (X VODA, TIM 628 6TH ST) Delete		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: SHUMAYA BAUTISTA-HARDMAN D 07/01/2004