

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003715

FILED
Apr 28, 2006
Secretary of State

Entity Name: BREEZE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6450 WEST 21 COURT, STE 301
HIALEAH, FL 33016 US

New Principal Place of Business:

1555 NORTH TREASURE DRIVE
NORTH BAY VILLAGE, FL 33141 US

Current Mailing Address:

6450 WEST 21 COURT, STE 301
HIALEAH, FL 33016 US

New Mailing Address:

7900 NW 155TH STREET
205
MIAMI LAKES, FL 33016 US

FEI Number: 01-0822466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARS, GARY M ESQ.
C/O HYMAN KAPLAN GANGUZZA SPECTOR & MARS
150 WEST FLAGLER ST. MUSEUM TWR., 27TH FL
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DELGADO, OSCAR
Address: 6450 WEST 21 COURT, STE 301
City-St-Zip: HIALEAH, FL 33016 US

Title: VD () Delete
Name: DELGADO, JOSE
Address: 6450 WEST 21 COURT, STE 301
City-St-Zip: HIALEAH, FL 33016 US

Title: TSD () Delete
Name: DELGADO, SUSAN
Address: 6450 WEST 21 COURT, STE 301
City-St-Zip: HIALEAH, FL 33016 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STEELE, STEVEN
Address: 6970 SW 124 STREET
City-St-Zip: MIAMI, FL 33156 US

Title: VD (X) Change () Addition
Name: MARQUES, PATRICIA
Address: 1555 NORTH TREASURE DRIVE 513
City-St-Zip: NORTH BAY VILLAGE, FL 33141 US

Title: TSD (X) Change () Addition
Name: OJMAN, PABLO
Address: 1555 NORTH TREASURE DR 413
City-St-Zip: NORTH BAY VILLAGE, FL 33141 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

SIGNATURE: STEVEN STEELE

P

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date