

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010148

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** NIRVANA MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

703 NE 63RD ST  
MIAMI, FL 33138 US

**New Principal Place of Business:**

**Current Mailing Address:**

703 NE 63RD ST  
MIAMI, FL 33138 US

**New Mailing Address:**

**FEI Number:** 34-2014466

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SKRLD, INC.  
201 ALHAMBRA CIR STE 1102  
CORAL GABLES, FL 33134 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  
Name: SALVATORE, RUSSO PRES  
Address: 703 NE 63RD ST  
City-St-Zip: MIAMI, FL 33138 US

Title: VPD  
Name: MANUEL, WLADDIMIRO VPRES  
Address: 703 NE 63RD ST  
City-St-Zip: MIAMI, FL 33138 US

Title: S  
Name: PABLO, MAURER SECTRES  
Address: 703 NE 63RD ST  
City-St-Zip: MIAMI, FL 33138 US

Title: T  
Name: KEVIN, MORRIS BOD  
Address: 703 NE 63RD ST  
City-St-Zip: MIAMI, FL 33138

Title: BOD  
Name: MARC, BREDENBACH BOD  
Address: 703 NE 63RD ST  
City-St-Zip: MIAMI, FL 33138

Title: BOD  
Name: MARGARET, ROSE BOD  
Address: 703 NE 63RD ST  
City-St-Zip: MIAMI, FL 33138

I hereby 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 all other like empowered.

SIGNATURE: RADAMES TORRES

CAM

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date