

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90218 013 ****61.25

DOCUMENT # N04000003245

1. Entity Name
NIRVANA CONDOMINIUM NO. FOUR ASSOCIATION, INC



40087014



Principal Place of Business
**700 NORTHEAST 63RD STREET
MIAMI, FL 33138**

Mailing Address
**703 NORTHEAST 63RD STREET
MIAMI, FL 33138**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01312007 Chg-NP CR2E037 (12/06)

4. FEI Number
20-0937347

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**COHEN, AARON
150 E PALMETTO PRK RD STE 110
BOCA RATON, FL 33432**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2007**

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 **P** ☐ Delete
NAME **MARIO, SCOTT**
STREET ADDRESS **700 NE 63RD ST UNIT D 303**
CITY-ST-ZIP **MIAMI, FL 33138**

TITLE **VP** ☒ Delete
NAME **SOLOGNO, LIDA**
STREET ADDRESS **700 NE 63RD ST UNIT D605**
CITY-ST-ZIP **MIAMI, FL 33138**

TITLE **ST** ☒ Delete
NAME **DIAZ, ALEXANDER**
STREET ADDRESS **700 NE 63RD STE UNIT D406**
CITY-ST-ZIP **MIAMI, FL 33138**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Sec/Treas.** ☐ Change ☒ Addition
NAME **Mario Padilla**
STREET ADDRESS **700 N.E. 63 ST # D510**
CITY-ST-ZIP **Miami, FL 33138**

TITLE **V.P.** ☐ Change ☒ Addition
NAME **Marc Bredenkamp**
STREET ADDRESS **700 N.E. 63 ST # D307**
CITY-ST-ZIP **Miami, FL 33138**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Scott Mario **SCOTT MARIO**

4/17/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #