

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003569

FILED
Jan 07, 2006
Secretary of State

Entity Name: SOUTH MIAMI AVENUE IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

1838 S MIAMI AV
MIAMI, FL 331291513

New Principal Place of Business:

Current Mailing Address:

1838 S MIAMI AV
MIAMI, FL 331291513

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SVALDI, MICHAEL
1838 S MIAMI AV
MIAMI, FL 331291513 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: DP () Delete
Name: SVALDI, MICHAEL
Address: % 1838 S MIAMI AV
City-St-Zip: MIAMI, FL 331291513

Title: DV () Delete
Name: BOUZA, RALPH
Address: % 1838 S MIAMI AV
City-St-Zip: MIAMI, FL 331291513

Title: DST () Delete
Name: ROIZ, JESUS E
Address: % 1838 S MIAMI AV
City-St-Zip: MIAMI, FL 331291513

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL SVALDI

PRES

01/07/2006

Electronic Signature of Signing Officer or Director

Date