

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004303

FILED
Mar 26, 2006
Secretary of State

Entity Name: FISHER ISLAND INCORPORATION COMMITTEE, INC.

Current Principal Place of Business:

4933 FISHER ISLAND DR
MIAMI, FL 33109

New Principal Place of Business:

13 FISHER ISLAND DR
GABLES TRAILER/OFFICE
MIAMI, FL 33109

Current Mailing Address:

4933 FISHER ISLAND DR
MIAMI, FL 33109

New Mailing Address:

FEI Number: 06-1724651

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, JORGE L
4933 FISHER ISLAND DR
MIAMI, FL 33109 US

Name and Address of New Registered Agent:

OSTROW, IRA L
5024 FISHER ISLAND DR
MIAMI, FL 33109 US

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: IRA OSTROW

03/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GARCIA, JORGE L
Address: 4933 FISHER ISLAND DR
City-St-Zip: MIAMI, FL 33109

Title: D () Delete
Name: ACOSTA, JAVIER A
Address: 4933 FISHER ISLAND DR
City-St-Zip: MIAMI, FL 33109

Title: D () Delete
Name: VOLE, ROBERT B
Address: 7777 FISHER ISLAND DR
City-St-Zip: MIAMI, FL 33109

Title: D () Delete
Name: OSTROW, IRA
Address: 5024 FISHER ISLAND DR
City-St-Zip: MIAMI, FL 33109

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:

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: IRA OSTROW

D

03/26/2006

Electronic Signature of Signing Officer or Director

Date