2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006
Secretary of State

DOCUMENT# N04000009581

Entity Name: 350 SOUTH SHORE DRIVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

350 SOUTH SHORE DRIVE
UNIT 20
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

350 SOUTH SHORE DRIVE
UNIT 20
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 20-1730981 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARCIA, BARBARA
ARAZOZA & FERNANDEZ-FRAGA, PA
2100 SALZEDO STREET, SUITE 300
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 ( ) Delete
Name: NIURKA, GOENAGA
Address: 350 SOUTH SHORE DRIVE, UNIT 16
City-St-Zip: MIAMI BEACH, FL 33141

Title: SVD (X) Delete
Name: SMITH, SHELAGH
Address: 350 SOUTH SHORE DRIVE, UNIT 3
City-St-Zip: MIAMI BEACH, FL 33141

Title: TD ( ) Delete
Name: FUCHS, DANIEL
Address: 350 SOUTH SHORE DRIVE, UNIT 12
City-St-Zip: MIAMI BEACH, FL 33141

Title: SD ( ) Delete
Name: DRUCKER, ALINE
Address: 350 SOUTH SHORE DRIVE, UNIT 20
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete
Name: GARCIA, BARBARA
Address: 350 SOUTH SHORE DRIVE, UNIT 11
City-St-Zip: MIAMI BEACH, FL 33141

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:

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: BARBARA GARCIA D 04/21/2006
Electronic Signature of Signing Officer or Director — Date