

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

04-16-2007 90331 044 ****61.25

DOCUMENT # N04000009964 1. Entity Name 1501 OCEAN STEPS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 701 BRICKELL AVENUE 1460 MIAMI, FL 33131			Mailing Address 701 BRICKELL AVENUE 1460 MIAMI, FL 33131		
2. Principal Place of Business - No P.O. Box # 1501 Collins Ave		3. Mailing Address 1501 Collins Ave		 04132007 Chg-NP CR2E037 (12/06)	
Suite, Apt. #, etc. #20		Suite, Apt. #, etc. #20			
City & State Miami Beach FL		City & State Miami Beach, FL			
Zip 33139		Zip 33139			
4. FEI Number 20-2433486				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent BARBERA, JACQUES 701 BRICKELL AVE SUITE 1460 MIAMI, FL 33131	
7. Name and Address of New Registered Agent Name: Haim Turgman Street Address (P.O. Box Number is Not Acceptable): 1501 Collins Ave # 20 City: Miami Beach FL Zip Code: 33139				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: April 13/07	
Filing Fee is \$62.25 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VERITE, JEAN-CLAUDE 701 BRICKELL AVENUE MIAMI, FL 33131	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Haim Turgman 1501 Collins Ave #20 Miami Beach, FL 33139	☒ Change ☐ Addition
			PRESIDENT		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST IBANEZ, MARIA 701 BRICKELL AVENUE MIAMI, FL 33131	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert De Burro 1501 Collins Ave #20 Miami Beach, FL 33139	☒ Change ☐ Addition
			SECRETARY		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert Wolf 1501 Collins Ave #20 Miami Beach, FL 33139	☒ Change ☐ Addition
			VICE PRESIDENT		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE: April 13/07 305 Daytime Phone #: 612200		