
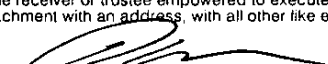


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 29, 2007 8:00 am**  
**Secretary of State**

01-29-2007 90066 049 \*\*\*\*61.25

<b>DOCUMENT # N05000000482</b> 1. Entity Name <b>PLAZA 57 CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>7301 SW 57TH CT SUITE 440 SOUTH MIAMI, FL 33143</b>			Mailing Address <b>7301 SW 57TH CT SUITE 440 SOUTH MIAMI, FL 33143</b>		
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	01232007 Chg-NP CR2E037 (12/06)	
4. FEI Number <b>20-2847927</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>MATTAWAY, L. RICHARD 7301 SW 57TH CT SUITE 440 SOUTH MIAMI, FL 33143</b>			7. Name and Address of New Registered Agent Name <b>Richard Brandon Lurie</b> Street Address (P.O. Box Number is Not Acceptable) <b>Same</b> City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTV MATTAWAY, L RICHARD 7301 SW 57TH CT SUITE 440 SOUTH MIAMI, FL 33143	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE President Pedro Garcia 7301 SW 57 CT. Suite 540 So. Miami, FL. 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATTAWAY, L RICHARD 7301 SW 57TH CT SUITE 440 SOUTH MIAMI, FL 33143	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Angel Veliz 7301 SW 57 CT. Suite 520 So. Miami, FL. 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D President LURIE, BRANDON 7301 SW 57TH CT SUITE 440 SOUTH MIAMI, FL 33143	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Tony Rodriguez 7301 SW 57 CT Suite 450 So. Miami, FL. 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATTAWAY, LISA 7301 SW 57TH CT SUITE 440 SOUTH MIAMI, FL 33143	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Edward Guttenmarter 7301 SW 57 CT. Suite 560 So. Miami, FL. 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE 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.					
<b>SIGNATURE:</b>  <b>Brandon Lurie</b> <span style="float: right;">1/23/07</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					