

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009726

FILED  
Mar 17, 2011  
Secretary of State

**Entity Name:** RIVE MARSEILLES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1185 MARSEILLES DRIVE  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LMM  
P.O. BOX 330971  
MIAMI, FL 33133

**New Mailing Address:**

C/O LMM  
1801 SW 3RD AVE #402  
MIAMI, FL 33129

**FEI Number:** 20-3520307

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REINALDO CASTELLANOS, P.A.  
9960 BIRD ROAD  
MIAMI, FL 33165 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: P  
Name: SOLDI, ROBERT  
Address: 1185 MARSEILLE DRIVE #110  
City-St-Zip: MIAMI BEACH, FL 33141

Title: STD  
Name: QUINTERO, DIANA  
Address: PO BOX 830114  
City-St-Zip: MIAMI, FL 33283

Title: VP  
Name: BIGAYER, DIANNE  
Address: 10490 RIO LINDO  
City-St-Zip: DEL RAY BEACH, FL 33446

Title: D  
Name: PISANO, NICHOLAS  
Address: 129 NE 44TH STREET  
City-St-Zip: MIAMI, FL 33137

Title: D  
Name: FRANK, MERLE  
Address: 8636 SW 94TH STREET  
City-St-Zip: MIAMI, FL 33156

I hereby 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 all other like empowered.

SIGNATURE: MELANIE BARNICK ONDRUSKA

MGR

03/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date