

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009974

FILED  
Jul 07, 2008  
Secretary of State

Entity Name: AVENTURA MARINA ONE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3340 NE 190 STREET, #100  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

3340 NE 190 STREET, #100  
AVENTURA, FL 33180

**New Mailing Address:**

FEI Number: 20-3576935      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GLAZER & ASSOCIATES, P.A.  
1920 E HALLANDALE BEACH BLVD  
HALLANDALE, FL 33009      US

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

KATZMAN AND KORR  
1501 NW 49TH STREET SUITE 202  
FORT LAUDERDALE, FL 33309      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: LEIGH C KATZMAN

07/07/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: GULLIA, EMIL M  
Address: 3340 NE 190 ST #106  
City-St-Zip: AVENTURA, FL 33180

Title: V      ( ) Delete  
Name: GREENBLATT, ELLIOT D. L  
Address: 3340 NE 190 ST #303  
City-St-Zip: AVENTURA, FL 33180

Title: T      ( ) Delete  
Name: PATEL, HIMANSHU M  
Address: 3340 NE 190 ST #404  
City-St-Zip: AVENTURA, FL 33180

Title: S      ( ) Delete  
Name: BUITRAGO, BEATRIZ  
Address: 3340 NE 190 ST #402  
City-St-Zip: AVENTURA, FL 33180

Title: D      ( ) Delete  
Name: LITT, ALEXANDER  
Address: 3340 NE 190 ST #803  
City-St-Zip: AVENTURA, FL 33180

**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 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: DR. EMIL GULLIA

P

07/07/2008

Electronic Signature of Signing Officer or Director

Date