2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05453

1. Entity Name

7900 WAREHOUSE CONDOMINIUM ASSOCIATION, INC.



FILED Feb 15, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

11041 SW 26 STREET MIAMI, FL 33165 11041 SW 26 ST. MIAMI, FL 33165



DO NOT WRITE IN THIS SPACE

02122006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2686890

Appiled Far
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DALMAU, JUAN R. 11041 SW 26 ST. MIAMI, FL 33165

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the tions of registered agent.	purpose of changing its registered	office or r	registered agent, or bot	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature, typed or presed name of registered agent and title if applicable. [POTE: Registered.			Арем мунаште пецияей when reinstaing)		DATE	
	Filing Fee is \$61.25 Due by May 1, 2006	Election Campaign Financir Trust Fund Contribution.	og 🏻	\$5.00 May 8e Added to Fees		
10.	OFFICERS AND DIRECTORS			···············		
HITLE NAME STRICET ADDRESS CITY-ST-ZIP	PD DALMAU, JUAN R 11041 SW 26 ST. MIAMI, FL 33165	• • • • • • • • • • • • • • • • • • •			000000434589 02/25/06-80007-016 61.25	
TITLE NAME STRLET ADORESS CITY-51-ZIP	TD HERRERA, JORGEL					
TITLE NAME STRILLI ADDRESS CITY-ST-ZP	SO DALMAU, DANIA 14742 BRECKNEWSS PLACE MIAMI LAKES, FL 33016	• • • • • • • • • • • • • • • • • •		DO NOT WRITE		
HILE NAME STREET ADDRESS CITY-ST-ZP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE	1					

12. Thereby 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 the 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 trasted explosivered 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:

NAME STREET ADDRESS CITY-ST-ZIP

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2-12-06 (786) 315-2044