

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003297

FILED
May 04, 2009
Secretary of State

Entity Name: MUSEUM PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1111 PARK CENTRE BOULEVARD, SUITE 450
MIAMI GARDENS, FL 33169

New Principal Place of Business:

1111 PARK CENTRE BOULEVARD, SUITE 474
MIAMI GARDENS, FL 33169

Current Mailing Address:

1111 PARK CENTRE BOULEVARD, SUITE 450
MIAMI GARDENS, FL 33169

New Mailing Address:

FEI Number: 20-4733689 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:

FIELDSTONE, RONALD R
201 ALHAMBRA CIRCLE
601
CORAL GABLES, FL 33134 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: PTD () Delete
Name: SHOSHANI, NIR
Address: 18425 NW 2ND AVE
City-St-Zip: MIAMI GARDENS, FL 33169

Title: VSD () Delete
Name: GOTTESMANN, RON
Address: 18425 NW 2ND AVE
City-St-Zip: MIAMI GARDENS, FL 33169

Title: D () Delete
Name: ROSEN, MARK
Address: 200 S. ANDREWS AVE. SUITE 602
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: SHOSHANI, NIR
Address: 1111 PARK CENTRE BOULEVARD, SUITE 474
City-St-Zip: MIAMI GARDENS, FL 33169

Title: VSD (X) Change () Addition
Name: GOTTESMANN, RON
Address: 1111 PARK CENTRE BOULEVARD, SUITE 474
City-St-Zip: MIAMI GARDENS, FL 33169

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: NIR SHOSHANI

PTD

05/04/2009

Electronic Signature of Signing Officer or Director

Date