

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 03, 2007**  
**Secretary of State**

DOCUMENT# N06000004620

**Entity Name:** COBALT CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2195 BAY DR.  
MIAMI BEACH, FL 33141**New Principal Place of Business:****Current Mailing Address:**2195 BAY DR.  
#8  
MIAMI BEACH, FL 33141**New Mailing Address:**1433 COLLINS AVE  
LOWER LOBBY  
MIAMI BEACH, FL 33139**FEI Number:** 20-5363416**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**JACOBS, RUSSELL  
2195 BAY DR.  
MIAMI BEACH, FL 33141 US**Name and Address of New Registered Agent:**SABET, MICHAEL  
1433 COLLINS AVENUE  
MIAMI BEACH, FL 33139 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: MICHAEL SABET

12/03/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: JACOBS, RUSSELL S.  
Address: 1835 NE MIAMI GARDENS DR., STE. 142  
City-St-Zip: N. MIAMI BEACH, FL 33179

Title: DVS ( ) Delete  
Name: SCHEINBLUM, BRIAN  
Address: 1835 NE MIAMI GARDENS DR., STE. 142  
City-St-Zip: N. MIAMI BEACH, FL 33179

Title: DT (X) Delete  
Name: SABET, MICHAEL  
Address: 1835 NE MIAMI GARDENS DR., STE. 142  
City-St-Zip: N. MIAMI BEACH, FL 33179

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPT (X) Change ( ) Addition  
Name: SABET, MICHAEL  
Address: 5660 COLLINS AVENUE #18A  
City-St-Zip: MIAMI BEACH, FL 33140

Title: DVS (X) Change ( ) Addition  
Name: SCHEINBLUM, BRIAN  
Address: 1433 COLLINS AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139

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: MICHAEL SABET

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12/03/2007

Electronic Signature of Signing Officer or Director

Date