

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004715

FILED  
Mar 23, 2007  
Secretary of State

Entity Name: KING XIII CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

13315 N.E. 6TH AVE.  
APT. #1 OFFICE  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

13315 N.E. 6TH AVE.  
APT. #1 OFFICE  
NORTH MIAMI, FL 33161

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FEINBERG, JEFFREY ESQ.  
4000 HOLLYWOOD BOULEVARD  
SUITE 350  
HOLLYWOOD, FL 33021 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: PD ( ) Delete  
Name: CHELMINSKY, STEVE  
Address: 13315 N.E. 6TH AVE. UNIT 1  
City-St-Zip: NORTH MIAMI, FL 33161

Title: VD ( ) Delete  
Name: CHELMINSKY, ALLEN  
Address: 3988 194 LANE  
City-St-Zip: SUNNY ISLES, FL 33160

Title: SD ( ) Delete  
Name: COHEN, KOBI  
Address: 19390 COLLINS AVE. APT. 721A  
City-St-Zip: SUNNY ISLES, FL 33160

Title: T ( ) Delete  
Name: COHEN, ELI  
Address: 9273 COLLINS AVE. APT. 105  
City-St-Zip: SURFSIDE, FL 33159

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVE CHLMINSKY

PD

03/23/2007

Electronic Signature of Signing Officer or Director

Date