

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009052

FILED  
Mar 25, 2009  
Secretary of State

Entity Name: 450 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

450 77TH STREET  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

7145 COLLINS AVENUE  
MIAMI BEACH, FL 33141

**New Mailing Address:**

3933 BISCAYNE BLVD  
MIAMI, FL 33137

FEI Number: 20-5679160

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHEHEBAR, ABRAHAM MNG MBR  
7145 COLLINS AVENUE  
MIAMI BEACH, FL 33141 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: CHEHEBAR, ABRAHAM  
Address: 7145 COLLINS AVENUE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: VD ( ) Delete  
Name: SCHMUTTER, STEVEN  
Address: 7145 COLLINS AVENUE  
City-St-Zip: MIAMI BEACH, FL 33141

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

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: ABRAHAM CHEHEBAR

MNG

03/25/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date