


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2006 8:00 am
Secretary of State

02-08-2006 90014 003 ****61.25

DOCUMENT # N06466
 1. Entity Name
SAHARA BEACH CLUB MOTEL CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 275 FOUNTAINEBLEAU BLVD. 200 MIAMI, FL 33172 US	Mailing Address 275 FOUNTAINEBLEAU BLVD. 200 MIAMI, FL 33172 US
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01082006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2499105	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 DOVAL, FELIX
 1760 SW 16TH TERR
 MIAMI, FL 33145

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME SD	DOVAL, FELIX 275 FOUNTAINEBLEAU BLVD #200 MIAMI, FL 33172
TITLE NAME D	TINELLI, ROBERT 275 FOUNTAINEBLEAU BLVD #200 MIAMI, FL 33172
TITLE NAME TD	TORRES, THOMAS DELITE 275 FOUNTAINEBLEAU BLVD #200 MIAMI, FL 33172
TITLE NAME VD	GIL, JOSE 275 FOUNTAINEBLEAU BLVD #200 MIAMI, FL 33172
TITLE NAME TD	LOPEZ, JOSE 5370 PALM AVENUE #1 HIALEAH, FL 33012
TITLE NAME PD	SCHEER, LEOPOLDO 9690 S W 24th st. Miami, FL 33165

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12. I hereby 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 true 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 trustee empowered 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: *X Felix R. Doval (Secretary)* 01-20-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #