


2006

**CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 20, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N11000004269</b> 1. Entity Name 7711 DICKENS AVE., CONDOMINIUM, INC.	
--	---

Principal Place of Business 7711 DICKENS AVE APT 4 MIAMI BEACH, FL 33141 US	Mailing Address 7711 DICKENS AVE APT 4 MIAMI BEACH, FL 33141 US
--	--

**DO NOT WRITE IN THIS SPACE**

02162006	CR2E034 (11/05)
4. FEI Number 12-6440571	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

IBOLYA, FILEP K  
7711 DICKENS AVE  
APT 4  
MIAMI BEACH, FL 33141

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MODIA, DAVID 7711 DICKENS AVE #2 MIAMI BCH., FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HOMBERTO, CABALLERO 7711 DICKENS AVE #3 MIAMI BCH., FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD IBOLYA, FILEP K. 7711 DICKENS AV 4 MIAMI BEACH, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

U00000442678  
03/04/06-80031-010 150.00

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 607, 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: *David Modia*

2-16-2006 305-861-8615