

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N16205

1. Entity Name
PARKVIEW COMMERCIAL CENTER CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business
12338 SW 132ND COURT
MIAMI, FL 33188 US

Mailing Address
12338 SW 132ND COURT
MIAMI, FL 33188 US

FILED
06 OCT 24 PM 3:29

CLERK OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

12316 SW 132 Crt

Suite, Apt. #, etc.

3. Mailing Address

12316 SW 132 Crt

Suite, Apt. #, etc.

10172006

Chg-NP

CR2E037 (4/06)

City & State

Miami FL

City & State

Miami FL

4. FEI Number

59-2723239

Applied For

Not Applicable

Zip

33186

Country

USA

Zip

33186

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHAPIRO, JEREMY
1541 BRICKELL AVE
SUITE 1504
MIAMI, FL 33129

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME SHAPIRO, JEREMY
STREET ADDRESS 1541 BRICKELL AVE, SUITE 1504
CITY-ST-ZIP MIAMI, FL 33129

TITLE SD ☒ Delete
NAME ROSENBAUM, NATHAN
STREET ADDRESS 12338 SW 132ND COURT
CITY-ST-ZIP MIAMI, FL 33186

TITLE VD ☐ Delete
NAME SHAPIRO, LYNN
STREET ADDRESS 12316 SW 132 CT
CITY-ST-ZIP MIAMI, FL 33186

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Florence Lynn Shapiro PD ☐ Change ☐ Addition
NAME 12316 SW 132 Crt
STREET ADDRESS Miami FL 33186
CITY-ST-ZIP

TITLE Carmine Potenza VD ☐ Change ☒ Addition
NAME 12320 SW 132 Crt
STREET ADDRESS Miami FL 33186
CITY-ST-ZIP

TITLE Jesus Menendez SD ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OCT. 19, 06 305 332 2141

Date

Daytime Phone #