

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2006 8:00 am
Secretary of State

02-07-2006 90026 002 ****61.25

DOCUMENT # N20631

1. Entity Name

**MIAMI BEACH VICTORIA CONDOMINIUM ASSOCIATION
INCORPORATED**



Principal Place of Business

**818 MERIDIAN AVE.
APT. #2
MIAMI BEACH FL 33139
US**

Mailing Address

**818 MERIDIAN AVENUE
APT. #2
MIAMI BEACH FL 33139
US**



2. Principal Place of Business

818 MERIDIAN Ave

3. Mailing Address

818 MERIDIAN Ave

Suite, Apt. #, etc.

Apt #2

Suite, Apt. #, etc.

Apt #2

City & State

Miami Beach

City & State

Miami Beach

Zip

33139

Country

USA

Zip

33139

Country

USA

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1429140

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GARCIA, EDITH
818 MERIDIAN AVE
APT. 2
MIAMI BEACH FL 33139**

7. Name and Address of New Registered Agent

Name

Edith Garcia

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

818 Meridian Ave Apt #2

Miami Beach

City

FL

Zip Code

33139

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

Edith Garcia

(NOTE: Registered Agent signature required when reappointing)

1/25/06

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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 **VD** ☐ Delete
NAME **DEL RIO, GERARDO**
STREET ADDRESS **818 MERIDIAN AVE., #4**
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **PD** ☐ Delete
NAME **AVILA, MARIA E**
STREET ADDRESS **818 MERIDIAN AVE. #3**
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **SD** ☐ Delete
NAME **DEL RIO, REINA**
STREET ADDRESS **818 MERIDIAN AVE #3**
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **TD** ☐ Delete
NAME **GARCIA, EDITH**
STREET ADDRESS **818 MERIDIAN AVE. #2**
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **D** ☐ Delete
NAME **MENDEZ, MANOLO**
STREET ADDRESS **818 MERIDIAN AVE., #5**
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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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 Section 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:

Edith Garcia

1/25/06