**NONPROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State 2 DIVISION OF CORPORATIONS

## DOCUMENT #

3000 ISLAND BOULEVARD CONDOMINIUM ASSOCIATION, I

Principal Place of Business

3000 ISLAND BLVD WILLIAMS ISLAND N-MIAMI-BEACHTFL 33160 AllenTura

Mailing Address

3000 ISLAND BLVD WILLIAMS ISLAND N\_MIAMI-BEACHT FL 33160

Aventura

## FILED Jul 14, 1999 8:00 am Secretary of State

07-14-1999 90001 021 \*\*\*\*61.25

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2. Principal P	lace of Business	2a.	Mailing Address				3. Date Incorporated or Qualife	d				
21		26	_				11/29/1988					
Suite, Apt.	#, etc		Suite, Apt. #, etc.				4. FEI Number		Ĺ	+	ied For	
22		27					65-0090625			Not	Applicable	
City & State	9		City & State				5. Certifcate of Status Desired				ditional	
23		28								e Req		
Zip	Country	$\vdash$	Zip	Count	ry		6. Election Campaign Financing	<b>)</b> 🗆	· ·		lay Be	
24	25	29		30]			Trust Fund Contribution	Dintered		ded to	rees	
	9. Name and Address of Current	Regis	tered Agent		11	Name	10. Name and Address of New	Kegistered	Agent			
I				1,	''	INATITE						
SKRLD, INC					12	Street Add	dress (P.O. Box Number is Not Accep	table)			_	
201 ALHAMBRA CIRCLE, SUITE 1102												
CORAL G	SABLES FL 33134			8	13							
				8	4	City			85	Zip Co	ode	
	to the provisions of Sections 617.0502			1		1		_FL	. 1			
office or r	to the provisions of sections of 1700 and the State of m familiar with, and accept the obligation of the state of management of the state of the sta	of Florid ions of,	la. Such change was au Section 617.0503, Flori	tnorized t ida Statuti	oy 1 es.	tne corporat	ion's board of directors. I hereby acc	ept the appoi	nument a	us regi		
12.	Signature, typed or printed name of registered agent OFFICERS ANI			13.	Jen	Signature requir	ADDITIONS/CHANGES TO C		ID DIRE	CTOR	S IN 12	
TITLE	PD OFFICERS AND	J DIRE	DELETE	1.1 701.6	=	$\overline{}$	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ Cha		Additio	
	· <del>-</del>			1.2 NAM					_	•	_	
NAME	EPSTEIN, AL 3000 ISLAND BLVD., #502					ADDRESS						
STREET ADDRESS				1								
CITY-ST-ZIP	AVENTURA FL 33160		☐ DELETE	1,4 CITY 2,1 TITU			Director		Deha	ange	Addition	
TITLE	VPD -						71160101				_	
MAME	DIAMOND,-ROBERT		ى <sub>ب</sub> ـــــــــــــــــــــــــــــــــــ		_		<del></del>			·		
STREET ADDRESS	3000 ISLAND BLVD STE 1806					ADDRESS						
CITY-ST-ZIP	AVENTURA FL 33160		☐ DELETE	2.4 CITY	_	f-ZIP		<del> </del>	☐ Cha	ange	Addition	
TITLE	SD DATE DATE		∵ DETE IE	3.1 TITU								
NAME	SWARTE, RAE			3.2 NAM								
STREET ADDRESS	3000 ISLAND BLVD STE 2603					ADDRESS						
CITY-ST-ZIP	AVENTURA FL 33160			3.4. CITY	_	r-zip			□ Cha	nna	Additio	
TITLE	TD		☐ DELETE	4.1 TITLE		\				ac		
NAME	SILVERMAN, MARC			4. 2 NAM								
STREET ADDRESS	3000 ISLAND BLVD STE 2205					ADDRESS						
CITY-ST-ZIP	AVENTURA FL 33160			4.4 CITY	_	-ZIP	Cia Desirida	<del></del>	<b>∏</b> €ha	2000	Additio	
TITLE	D		☐ DELETE	5.1 TITL	_	10	ile-President		X	ı iye		
NAME	SCHNEIDER, RUEBEN			5.2 NAM					•			
STREET ADDRESS	3000 ISLAND BLVD #604			1		ADDRESS						
CITY-ST-ZIP	AVENTURA FL 33160			5.4 CITY			· · · · · · · · · · · · · · · · · · ·				Zaditio	
TITLE	D		DELETE	6.1 TITL		$ \mathcal{D} $	gerald lohen 3000 Island B		Licha	inge	La Productio	
NAME	Marsh, Henry			6.2 NAM		6	gerald conep	Just.	# 10	102	1	
STREET ADDRESS	3000 ISLAND BLVD STE 604					ADORESS	3000 Island, 1	700 . 4	<del>,</del> , ,		•	
	AVENTUDA EL 20460			64 CITY	·ST	7-7IP	Allentura DI =	ちろしんじし				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: