

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90219 025 ****61.25

DOCUMENT # N33475

1. Entity Name
OCEANIA III CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**16485 COLLINS AVENUE
MIAMI BEACH, FL 33160 US**

Mailing Address
**16485 COLLINS AVENUE
MIAMI BEACH, FL 33160 US**

40090202



DO NOT WRITE IN THIS SPACE

04222008 No Chg-NP

CR2E037 (4/06)

4. FEI Number
65-0135249

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BURR, ROBERT ESQ
CENTURION TOWER, SUITE 701
1601 FORUM PLACE
WEST PALM BEACH, FL 33401**

**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

Robert B. Burr
Robert B. Burr

4/21/08

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

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
**SD
NICHOLAS, CALVO JR.
16485 COLLINS AVE.
N. MIAMI BEACH, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
BLUMENTHAL, RAMON
16485 COLLINS AVE.
N. MIAMI BEACH, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
GOLDBERG, JOE
16485 COLLINS AVE. #2235
SUNNY ISLES BEACH, FL 33160**

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**

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:

Ramon Blumenthal
RAMON BLUMENTHAL

Date

Daytime Phone #

305-919-8668

4-25-08