

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33479

FILED
Jan 19, 2012
Secretary of State

Entity Name: OCEANIA I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

16425 COLLINS AVE
MANAGEMENT OFFICE
SUNNY ISLES BEACH, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

16425 COLLINS AVE
MANAGEMENT OFFICE
NORTH MIAMI BEACH, FL 33160 US

New Mailing Address:

FEI Number: 65-0135257 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HYMAN, MICHAEL ESQ
150 WEST FLAGLER ST
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: T
Name: PINE, EMANUEL F
Address: 16425 COLLINS AVE. APT #2214
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: S
Name: BLOCKER, SUZY LIPTAK
Address: 16425 COLLINS AVE. APT #618
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: D
Name: BETTY, ANDA
Address: 16425 COLLINS AVE. APT #2011
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VP
Name: BOCK, DONNA
Address: 16425 COLLINS AVE. APT #2416
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: P
Name: MILA, PABLO
Address: 16425 COLLINS AVE. APT #415
City-St-Zip: MIAMI BEACH, FL 33160

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: EMANUEL PINE

PD

01/19/2012

Electronic Signature of Signing Officer or Director

Date