

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34778

FILED  
Feb 05, 2009  
Secretary of State

Entity Name: IVES DAIRY COMMERCE CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

MIAMI MANAGEMENT INC  
14275 SW 142 AVE  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

MIAMI MANAGEMENT INC  
14275 SW 142 AVE  
MIAMI, FL 33186

**New Mailing Address:**

FEI Number: 20-3859197      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HYMAN, SPECTOR & MARS  
ATTN: DARRIN GURSKY  
150 WEST FLAGLER STREET, 27TH FLOOR  
HALLANDALE, FL 33009 US

**Name and Address of New Registered Agent:**

HYMAN, SPECTOR & MARS  
ATTN: DARRIN GURSKY  
150 WEST FLAGLER STREET, 27TH FLOOR  
MIAMI, FL 33130 US

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: DARRIN GURSKY      02/05/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: VPD ( ) Delete  
Name: BASSIN, ALEX  
Address: 20195 NE 16 PL  
City-St-Zip: MIAMI, FL 33179

Title: PD ( ) Delete  
Name: TRACZ, EDUARDO  
Address: 20137 NE 16 PLACE  
City-St-Zip: MIAMI, FL 33179

Title: STD ( ) Delete  
Name: BESNER, JOANNE  
Address: 21050 NE 38 AVE 402  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: BASSIN, ALEX  
Address: 20195 NE 16 PL  
City-St-Zip: MIAMI, FL 33179

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: BESNER, JOANNE  
Address: 21050 NE 38 AVE #402  
City-St-Zip: MIAMI, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ALEX BASSIN      VP      02/05/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date