

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # N35136

1. Entity Name
NINETY FIVE RIVERSIDE PROPERTY OWNERS
ASSOCIATION, INC.



Principal Place of Business

10451 N W 33 ST
MIAMI, FL 33172 US

Mailing Address

7990 SW 117 AVE
SUITE 203
MIAMI, FL 33183 US



03082005 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0249458

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARTIN TABOR & ASSOCIATES
10451 N W 33 ST
MIAMI, FL 33172

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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	PD TABOR, MARTIN 10451 N W 33 ST MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PERLSTEIN, ARNOLD E 441 MONT CLAIRE DR WESTIN, FL 33326
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TABOR, ABBY 10451 NW 33 STREET MIAMI, FL 33172
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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04/26/05-80081-004 70.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-17-05

772-463-7400