

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38192

FILED
Jan 24, 2005
Secretary of State

Entity Name: 360 BUILDING, INC., A CONDOMINIUM

Current Principal Place of Business:

360 MERIDIAN AVE
2B
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

360 MERIDIAN AVE.
2B
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0263031 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, ANGEL
360 MERIDIAN AVE
2B
MIAMI BEACH, FL 33139 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: ST () Delete
Name: MUNIZ, TOMAS
Address: 360 MERIDIAN AVENUE #3A
City-St-Zip: MIAMI BEACH, FL 33139

Title: PD () Delete
Name: FAJARDO, MIGUEL
Address: 360 MERIDIAN AVENUE #6C
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: LAMMERSDORF, IRENE
Address: 360 MERIDIAN AVE. #6E
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD () Delete
Name: TORRES, ANGEL
Address: 360 MERIDIAN AVENUE #5C
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: PERKINS, CATHERINE
Address: 360 MERIDIAN AVE. #4A
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: MUNIZ, TOMAS
Address: 360 MERIDIAN AVENUE #3A
City-St-Zip: MIAMI BEACH, FL 33139

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

Title: D (X) Change () Addition
Name: RAMOS, ANGEL
Address: 360 MERIDIAN AVE. #4E
City-St-Zip: MIAMI BEACH, FL 33139

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

Title: D (X) Change () Addition
Name: GONZALEZ, GERARDO
Address: 360 MERIDIAN AVE. #4D
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TOMAS MUNIZ

STD

01/24/2005

Electronic Signature of Signing Officer or Director

Date