

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90261 021 ****61.25

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1. Entity Name
THE DECOPLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
**100 LINCOLN ROAD
 MIAMI BEACH, FL 33139**

Mailing Address
**100 LINCOLN ROAD
 MIAMI BEACH, FL 33139**

4000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number

65-0390632

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GOMEZ, MICHAEL E ESQ
 1930 TYLER STREET
 HOLLYWOOD, FL 33020**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

[Handwritten Signature]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-17-06

**Filing Fee is \$61.25
 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Delete
 NAME ROBERTS, SHERRY
 STREET ADDRESS 100 LINCOLN ROAD, PH-2
 CITY-ST-ZIP MIAMI BEACH, FL 33139

TITLE D Change Addition
 NAME Brian Wilson
 STREET ADDRESS 100 Lincoln Road PH-7
 CITY-ST-ZIP Miami Beach FL 33139

TITLE VD Delete
 NAME GRANT, BARBARA
 STREET ADDRESS 100 LINCOLN RD #910
 CITY-ST-ZIP MIAMI BEACH, FL 33139

TITLE D Change Addition
 NAME Maria Julia Garcia
 STREET ADDRESS 100 Lincoln Road #1008
 CITY-ST-ZIP Miami Beach FL 33139

TITLE TD Delete
 NAME VILLAFVERTE, JULIETA
 STREET ADDRESS 100 LINCOLN RD #836
 CITY-ST-ZIP MIAMI BEACH, FL 33139

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ATD Delete
 NAME MIRACLE, ANDREW
 STREET ADDRESS 100 LINCOLN RD #814
 CITY-ST-ZIP MIAMI BEACH, FL 33139

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME CHAVES, LINDY
 STREET ADDRESS 100 LINCOLN RD #509
 CITY-ST-ZIP MIAMI BEACH, FL 33139

TITLE TD Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME RANDOLP, ALICE
 STREET ADDRESS 100 LINCOLN RD #PH-2
 CITY-ST-ZIP MIAMI BEACH, FL 33139

TITLE SD Change Addition
 NAME Alice Randolph
 STREET ADDRESS
 CITY-ST-ZIP

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 name empowered.

SIGNATURE:

[Handwritten Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/06

Date

(305)

672-3594

Daytime Phone #