

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002941

FILED  
Apr 15, 2005  
Secretary of State

**Entity Name:** AVENTURA BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

19201 COLLINS AVE.  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CONTINENTAL GROUP  
2950 N 28TH TERRACE  
HOLLYWOOD, FL 33020

**New Mailing Address:**

**FEI Number:** 65-0499756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STANTON, RICHARD  
TWO ALHAMBRA PLAZA STU 508  
CORAL GABLES, FL 33134 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: PD ( ) Delete  
Name: SCHECHTER, RICHARD  
Address: 19201 COLLINS AVE  
City-St-Zip: N MIAMI BEACH, FL

Title: STD ( ) Delete  
Name: SCHECHTER, SAUL  
Address: C/O MARTIN FRIEDMAN & CO, 2600 NOSTRAND AV  
City-St-Zip: BROOKLYN, NY

Title: VPD ( ) Delete  
Name: CARCASSES, ANTHONY  
Address: 19201 COLLINS AVE., #912  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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

Title: PD (X) Change ( ) Addition  
Name: SCHECHTER, RICHARD  
Address: 19201 COLLINS AVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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

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

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: VICTOR SALA

PM

04/15/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date