


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90021 038 ****61.25

DOCUMENT # N94000002941	
1. Entity Name AVENTURA BEACH CLUB CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 19201 COLLINS AVE. SUNNY ISLES BEACH, FL 33160	Mailing Address C/O CONTINENTAL GROUP 2950 N 28TH TERRACE HOLLYWOOD, FL 33020
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DO NOT WRITE IN THIS SPACE



01202006 No Chg-NP CR2E037 (11/05)

4. FEI Number 65-0499756	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent STANTON, RICHARD TWO ALHAMBRA PLAZA STU 508 CORAL GABLES, FL 33134 150 NW 183 RD STR. SUITE 200 MIAMI GARDEN FL. 33169

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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.

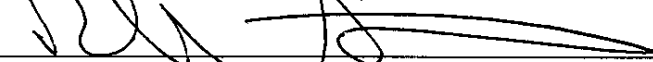
SIGNATURE _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHECHTER, RICHARD 19201 COLLINS AVE SUNNY ISLES BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SCHECHTER, SAUL C/O MARTIN FRIEDMAN & CO, 2600 NOSTRAND AV BROOKLYN, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CARCASSES, ANTHONY 19201 COLLINS AVE., #912 SUNNY ISLES BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 like empowered.

SIGNATURE: 	Date: 1/25/06	Daytime Phone #: 305-932-2233
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RICHARD SCHECHTER - PRES.