2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N94000003134

1. Entity Name
ATLANTIC I AT THE POINT CONDOMINIUM ASSOCIATION, INC.

FILED
04 OCT 22 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09212004 Chg-NP CR2E037 (10/03)

Principal Place of Business	Mailing Address
5555 ANGLERS AVE SUITE 1A FORT LAUDERDALE, FL 33312 US	5555 ANGLERS AVE SUITE 1A FORT LAUDERDALE, FL 33312 US

2. Principal Place of Business	3. Mailing Address
21200 POINT PLACE Suite, Apt. #, etc.	21200 POINT PLACE Suite, Apt. #, etc.
City & State: AVENTURA, FLORIDA	City & State: AVENTURA FLORIDA
Zip: 33180 Country: USA	Zip: 33180 Country: USA

4. FEI Number 65-0579499 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

REGISTERED AGENTS OF FLORIDA, LLC
100 SE 2ND STREET
SUITE 2900
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name: GARY MARS C/O HYMAN + KAPLAN
Street Address (P.O. Box Number is Not Acceptable): 150 WEST FLAGLER STREET 27TH FLOOR
City: MIAMI FL Zip Code: 33130

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.

300042106363
10/22/04--01044--003 **61.25

SIGNATURE: _____ 9/27/04
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	VPTD NEAL, MICHAEL 5555 ANGLERS AVE., STE 1A FORT LAUDERDALE, FL 33312	☒ Delete	PRESIDENT KATHY KREICAS 21200 POINT PLACE #1103 AVENTURA, FL 33180	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PIAZZA, ALBERT C 5555 ANGLERS AVE., SUITE 1A FORT LAUDERDALE, FL 33312	☒ Delete	VICE PRESIDENT MARK FRIED 3107 STIRLING ROAD #104 FORT LAUDERDALE, FLORIDA	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ALONSO, KIM 5555 ANGLERS AVE., STE 1A FORT LAUDERDALE, FL 33312	☒ Delete	VICE PRESIDENT / ASST. SECRETARY JULES LIPP P.O. BOX 3080 HALLANDALE, FL 33008.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TREASURER GUSTAVO BLACHMAN 17320 WEST DIXIE HIGHWAY NORTH MIAMI BEACH, FL 33160.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	VICE PRESIDENT ROY LUSTIG ESQ. 2800 DOUGLAS ROAD #908 CORAL GABLES, FL 33134	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	SECRETARY ROSA SZARF 21200 POINT PLACE #1504 AVENTURA 33180 CFO.	☐ Change ☒ Addition

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: _____ 10/06/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #