

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 06, 2006  
Secretary of State**

DOCUMENT# N96000000736

Entity Name: FORTUNE HOUSE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

185 SE 14TH TERRACE  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

185 SE 14 TERRACE  
STE. 104  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 65-0747430      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LEYTON, DANIEL L. ESQUIRE  
3001 SW THIRD AVENUE  
MIAMI, FL 33129 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: DP ( ) Delete  
Name: QURESHI, ROBERT  
Address: 888 BRICKELL KEY DR. #2802  
City-St-Zip: MIAMI, FL 33131

Title: DT ( ) Delete  
Name: SOARES, CRISTIANO  
Address: 185 SE 14 TERRACE  
City-St-Zip: MIAMI, FL 33131

Title: DS ( ) Delete  
Name: STEVENS, MATTHEW  
Address: 185 SE 14 TERR. #904  
City-St-Zip: MIAMI, FL 33131

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

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

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 Chapter 119, 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: ROBERT QURESHI

MR.

07/06/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date