2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

04 AUG -5 PM 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000006012

1. Entity Name
SOLIMAR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
9559 COLLINS AVE. MANAGEMENT OFFICE SURFSIDE, FL 33154	9559 COLLINS AVE. MANAGEMENT OFFICE SURFSIDE, FL 33154

07202004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
9559 COLLINS AVENUE	9559 COLLINS AVENUE
Suite, Apt. #, etc. MANAGEMENT OFFICE	Suite, Apt. #, etc. MANAGEMENT OFFICE
City & State SURFSIDE, FL	City & State SURFSIDE, FL
Zip 33154 Country USA	Zip 33154 Country USA

4. FEI Number
65-0822098
☐ Applied For
☐ Not Applicable

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
SOLIMAR CONDO ASSOC. INC. 9559 COLLINS AVENUE SURFSIDE, FL 33154	Name: SOLIMAR CONDO ASSOC. INC Street Address (P.O. Box Number is Not Acceptable): 9559 COLLINS AVENUE City: SURFSIDE FL Zip Code: 33154

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 _____
Signature, typed 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	T OJALVO, JOSE 9559 COLLINS AVENUE SURFSIDE, FL 33154	☐ Delete	D MARION PORTMAN 9559 COLLINS AVENUE, # N509 SURFSIDE, FL. 33154	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ERMER, JOHN 9559 COLLINS AVENUE #204 SURFSIDE, FL 33154	☐ Delete	S MARK KRAVITZ 9559 COLLINS AVENUE, # S710 SURFSIDE, FL. 33154	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MURPHEY, JOSEPH 9559 COLLINS AVENUE #1104 SURFSIDE, FL 33154	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LUKAC, JENNIE 9559 COLLINS AVENUE SURFSIDE, FL 33154	☐ Delete	300040167933 08/13/04--01044--011 **61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP GODUR, PHILLIP 9559 COLLINS AVENUE SURFSIDE, FL 33154	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: _____ 7/27/04 305-865-8462
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #