

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 14, 2008 8:00 am
Secretary of State

05-14-2008 90019 017 ****61.25

DOCUMENT # N97000006032

1. Entity Name

**THE MAJESTIC TOWER AT BAL HARBOUR CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business

**9601 COLLINS AVE
BAL HARBOUR FL 33154**

Mailing Address

**9601 COLLINS AVE
MIAMI FL 33154**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E037 (10/07)

4. FEI Number

65-0804484

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

**BECKER, POLIAKOFF PA
5201 BLUE LAGOON DRIVE
SUITE 100
MIAMI FL 33126**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 (and used when retaining)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

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 ☐ Delete
NAME **P KROP, LOIS**
STREET ADDRESS **9601 COLLINS AVENUE 1710**
CITY- ST- ZIP **BAL HARBOUR FL 33154**

TITLE ☒ Change ☐ Addition
NAME **SOLOWAY, MARK**
STREET ADDRESS **9601 COLLINS AVE, #1410**
CITY- ST- ZIP **BAL HARBOUR, FL 33154**

TITLE ☐ Delete
NAME **V ZELCHER, ROSA**
STREET ADDRESS **9601 COLLINS AVE 810**
CITY- ST- ZIP **MIAMI BEACH FL 33154**

TITLE ☐ Change ☒ Addition
NAME **V WISEMAN, ISSIE**
STREET ADDRESS **9601 COLLINS AVE. #PH-307**
CITY- ST- ZIP **BAL HARBOUR, FL 33154**

TITLE ☐ Delete
NAME **T LINZER, JACK**
STREET ADDRESS **9601 COLLINS AVE # 808**
CITY- ST- ZIP **BAL HARBOUR FL 33154**

TITLE ☒ Change ☐ Addition
NAME **T ZELCHER, ROSA**
STREET ADDRESS **9601 COLLINS AVE # 706**
CITY- ST- ZIP **BAL HARBOUR, FL 33154**

TITLE ☐ Delete
NAME **D SOLOWAY, MARK**
STREET ADDRESS **4601 COLLINS AVE #1410**
CITY- ST- ZIP **BAL HARBOUR FL 33154**

TITLE ☒ Change ☐ Addition
NAME **S KROP, LOIS**
STREET ADDRESS **9601 COLLINS AVE #1710**
CITY- ST- ZIP **BAL HARBOUR, FL 33154**

TITLE ☐ Delete
NAME **D OREN, YAIR**
STREET ADDRESS **9601 COLLINS AVE # PH-404**
CITY- ST- ZIP **BAL HARBOUR FL 33154**

TITLE ☒ Change ☐ Addition
NAME **D LINZER, JACK**
STREET ADDRESS **9601 COLLINS AVE # 808**
CITY- ST- ZIP **BAL HARBOUR, FL 33154**

TITLE ☐ Delete
NAME **S GOTMAN, ELSA**
STREET ADDRESS **9601 COLLINS AVE PH 101**
CITY- ST- ZIP **MIAMI BEACH FL 33154**

TITLE ☒ Change ☐ Addition
NAME **D OREN, YAIR**
STREET ADDRESS **9601 COLLINS AVE # PH-101**
CITY- ST- ZIP **BAL HARBOUR, FL 33154**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

L. P. Krop

4/24/08

305-864-0122