

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001591

FILED  
Mar 02, 2006  
Secretary of State

**Entity Name:** BYBLOS APARTMENTS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

95 S SHORE DRIVE  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

95 S SHORE DR  
2  
MIAMI BEACH, FL 33141

**New Mailing Address:**

95 S SHORE DR  
4  
MIAMI BEACH, FL 33141

**FEI Number:** 36-4561620

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOKHA, PAUL  
95 S SHORE DR  
2  
MIAMI BEACH, FL 33141 US

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

MAGANA, NELSON  
95 S SHORE DR  
4  
MIAMI BEACH, FL 33141 US

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: NELSON MAGANA

03/02/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MOKHA, PAUL  
Address: 95 S SHORE DR UNIT 2  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete  
Name: CARABALLO, WENDY  
Address: 95 S SHORE DR UNIT 3  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete  
Name: VIGUES, MELISSA  
Address: 95 S SHORE DR UNIT 1  
City-St-Zip: MIAMI BEACH, FL 33141

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

Title: D (X) Change ( ) Addition  
Name: MAGANA, NELSON  
Address: 95 S SHORE DR UNIT 4  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Change ( ) Addition  
Name: CRUZ, BRANDON  
Address: 95 S SHORE DR UNIT 3  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Change ( ) Addition  
Name: MOKHA, MONIQUE  
Address: 95 S SHORE DR UNIT 2  
City-St-Zip: MIAMI BEACH, FL 33141

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: NELSON MAGANA

D

03/02/2006

Electronic Signature of Signing Officer or Director

Date