

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003709

FILED
Jan 05, 2004
Secretary of State

Entity Name: 3006 AVIATION CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3006 AVIATION AVE, SUITE 2A
COCONUT GROVE, FL 33133

New Principal Place of Business:

3006 AVIATION AVE
SUITE 2A
COCONUT GROVE, FL 33133

Current Mailing Address:

3006 AVIATION AVE, SUITE 2A
COCONUT GROVE, FL 33133

New Mailing Address:

3006 AVIATION AVE
SUITE 2A
COCONUT GROVE, FL 33133

FEI Number: 65-0866468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AVILA, EDUARDO
3006 AVIATION AVE, SUITE 2A
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

SORDO, CESAR R
3006 AVIATION AVE
SUITE 2A
COCONUT GROVE, FL 33133 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: CESAR R. SORDO

01/05/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RUBIN, JAIME
Address: 3006 AVIATION AVE, SUITE 2A
City-St-Zip: COCONUT GROVE, FL 33133

Title: VD () Delete
Name: WISCHNEVSKY, NOEL
Address: 3006 AVIATION AVE, SUITE 2A
City-St-Zip: COCONUT GROVE, FL 33133

Title: STD () Delete
Name: AVILA, EDUARDO
Address: 3006 AVIATION AVE, SUITE 2A
City-St-Zip: COCONUT GROVE, FL 33133

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARIANO, BUSSO M.D.
Address: 3006 AVIATION AVE, SUITE 2C
City-St-Zip: COCONUT GROVE, FL 33133

Title: VD (X) Change () Addition
Name: REISMANN, JEROME
Address: 3006 AVIATION AVE, SUITE 4B
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD (X) Change () Addition
Name: GALVEZ, OSCAR M.D.
Address: 3006 AVIATION AVE, SUITE 4A
City-St-Zip: COCONUT GROVE, FL 33133

Title: TD () Change (X) Addition
Name: JORDAN, ENRIQUE
Address: 3006 AVIATION AVENUE, SUITE 3C
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARIANO BUSSO, M.D.

PD

01/05/2004

Electronic Signature of Signing Officer or Director

Date