2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000066008

City-St-Zip:

MIAMI BEACH, FL 33140

FILED Apr 09, 2009 Secretary of State

Entity Nan	ne: 247 23RD	STREET, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
247 23RD S MIAMI BEA	STREET CH, FL 33137	'US	247 23RD STREET MIAMI BEACH, FL 3313	9 US	
Current Ma	ailing Addres	s:	New Mailing Address:	New Mailing Address:	
	INS AVENUE				
1-F MIAMI BEA	CH, FL 33139) US			
FEI Number:	65-1118995	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of I	Name and Address of New Registered Agent:	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US The above named entity submits this statement for the purpose			# 1-F MIAMI BEACH, FL 3314	5055 COLLINS AVNEUE # 1-F MIAMI BEACH, FL 33140 US	
in the State	of Florida.				
SIGNATURE: CARMEL OPHIR Electronic Signature of Registered Agent				04/09/2009	
Election Cam		ic Signature of Registered Age Trust Fund Contribution ().	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () BARILICH, KEN 1445 WASHING MIAMI BEACH,	TON AVENUE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () FORTIS, CALLII 1445 WASHING MIAMI BEACH,	TON AVENUE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	MGRM () OPHIR, CARME 5055 COLLINS		Title: (Name: Address:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: CARMEL OPHIR MGRM 04/09/2009