

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000135610

Entity Name: CASA DEL MAR, INC.

FILED  
Apr 07, 2005  
Secretary of State

## Current Principal Place of Business:

200 SE 15 ROAD  
16-D  
MIAMI, FL 33129

## New Principal Place of Business:

94 MERRICK WAY  
380  
CORAL GABLES, FL 33134

## Current Mailing Address:

1534 POLK STREET  
HOLLYWOOD, FL 33020

## New Mailing Address:

6910 SUNRISE PLACE  
DOHM  
CORAL GABLES, FL 33133

FEI Number: 01-0767642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZIV, J TR  
200 SE 15 ROAD  
16-D  
MIAMI, FL 33129 US

## Name and Address of New Registered Agent:

ZIV, J A TR  
200 SE 15 ROAD  
16-D  
MIAMI, FL 33129 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: JAY A ZIV

04/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SD ( ) Delete  
Name: ZIV, J TR  
Address: 200 SE 15 ROAD 16-D  
City-St-Zip: MIAMI, FL 33129

Title: PD ( ) Delete  
Name: DOHM, JOHN  
Address: 3215 NW 10TH TERRACE, STE 209  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VPD ( ) Delete  
Name: CHRISTOPHERSEN, GEORGINA  
Address: 1534 POLK STREET  
City-St-Zip: HOLLYWOOD, FL 33020

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition  
Name: ZIV, J A TR  
Address: 95 MERRICK WAY - SUITE 380  
City-St-Zip: CORAL GABLES, FL 33123

Title: PD (X) Change ( ) Addition  
Name: DOHM, JOHN  
Address: 6910 SUNRISE PLACE  
City-St-Zip: CORAL GABLES, FL 33133

Title: VPD (X) Change ( ) Addition  
Name: CHRISTOPHERSEN, GEORGINA  
Address: 1534 POLK STREET  
City-St-Zip: HOLLYWOOD, FL 33020

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN W DOHM

PD

04/07/2005

Electronic Signature of Signing Officer or Director

Date