

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000053616

FILED
Mar 04, 2005
Secretary of State

Entity Name: N.E. 17TH AVENUE CORPORATION

Current Principal Place of Business:

13251-13455 N.E. 17 AVE.
NORTH MIAMI, FL 33181 US

New Principal Place of Business:

Current Mailing Address:

1140 KANE CONCOURSE
FIFTH FLOOR
BAY HARBOR ISLANDS, FL 33154 US

New Mailing Address:

7420 MIAMI VIEW DRIVE
MIAMI, FL 33141 US

FEI Number: 65-0692186 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SILVERS, ROBERT H.
1140 KANE CONCOURSE
FIFTH FLOOR
BAY HARBOR ISLANDS, FL 33154 US

Name and Address of New Registered Agent:

MANNO, JOSEPHINE
7420 MIAMI VIEW DRIVE
MIAMI, 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: JOSEPHINE MANNO

03/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MANNO, BERT
Address: 7420 MIAMI VIEW DRIVE
City-St-Zip: NO BAY VILLAGE, FL 33141

Title: D () Delete
Name: MANNO, JOSEPHINE
Address: 7420 MIAMI VIEW DRIVE
City-St-Zip: NO BAY VILLAGE, FL 33141

Title: D () Delete
Name: MANNO, PETER
Address: 1231 WASHINGTON STREET
City-St-Zip: HOLLYWOOD, FL 33019

Title: D () Delete
Name: MANNO, EILEEN
Address: ONE HARBOUR WAY
City-St-Zip: BAL HARBOUR, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MANNO, EILEEN
Address: ONE HARBOUR WAY #105
City-St-Zip: BAL HARBOUR, FL 33154

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: BERT MANNO

DIR

03/04/2005

Electronic Signature of Signing Officer or Director

Date