## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Apr 27, 2007 8:00 am Secretary of State **DOCUMENT #707621** 04-27-2007 90199 003 \*\*\*\*61.25 THE SHORES CONDOMINIUM, INC. Principal Place of Business Mailing Address 1700 NORTHEAST 105TH STREET 1700 NORTHEAST 105TH STREET MIAMI, FL 33138 MIAMI, FL 33138 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04252007 Chg-NP CR2E037 (12/06) City & State City & State Applied For 4. FEI Number 59-1095398 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired m Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARQUEZ, ESTHER Street Address (P.O. Box Number is Not Acceptable) 1700 N.E. 105 STREET **UNIT 416** MIAMI, FL 33138 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algorature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Due by May 1, 2007 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete TITSE TITLE ☐ Change X Addition O'CONNOR, MAUREEN NINA Korman NAME NAME 1700 NE 105 ST # 36 STREET ADDRESS 1700 NW 105 STREET #413 STREET ADDRESS CATY-ST-ZUP MIAMI, FL 33138 CJTY - ST - ZW miami shores FL 33138 <del>or V</del>₽ TITLE ☐ Delete TITLE ☐ Change X Addition RODRIGUEZ, JORGE Josque Gamayo NAME NAME 1700 NE 105 ST #406 STREET ADDRESS 1700 NE 105 STREET #512 STREET ADORESS MIAMI, FL 33138 CITY-ST-ZIP CITY-ST-ZIP Migmi Shores FL 33138 TITLE Delete TITLE ☐ Channe **SA** Addition Lucretia Payton MOROSCO, BILL NAME NAME 1700 NE 105 ST # 113 STREET ADDRESS 1700 NE 105 STREET #217 STREET ADDRESS MIAMI, FL 33138 miami shows FL 33/38 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Deiete T#T F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP mr Delete TINE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like smpowered.

SIGNATURE:

araues

Dayirre Prese \$

FILED