

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Aug 30, 2009
Secretary of State**

DOCUMENT# 717062

Entity Name: THREE HORIZONS, EAST, CONDOMINIUM, INC.**Current Principal Place of Business:**12500 N.E. 15 AVENUE
N. MIAMI, FL 33161 US**New Principal Place of Business:**12500 NE 15TH AVENUE
NORTH MIAMI, FL 33161 US**Current Mailing Address:**6915 TAFT STREET
HOLLYWOOD, FL 33024**New Mailing Address:**

FEI Number: 59-1438436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:SHAPIRO, PAUL
6915 TAFT ST
HOLLYWOOD, FL 33024 US**Name and Address of New Registered Agent:**RAY STRAUSS P.A.
17270 NE 19TH AVENUE
NORTH MIAMI, FL 33162 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: RAY STRAUSS

08/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DP () Delete
Name: BELL, IDA
Address: 6625 MIAMI LAKES DR. # 233
City-St-Zip: MIAMI LAKES, FL 33014 USTitle: DT () Delete
Name: FLORES, ANA
Address: 6625 MIAMI LAKES DR. #233
City-St-Zip: MIAMI LAKES, FL 33014 USTitle: DS () Delete
Name: LATTI, MIKE
Address: 6625 MIAMI LAKES DR. #233
City-St-Zip: MIAMI LAKES, FL 33014 USTitle: DVP () Delete
Name: SCHREIBER, ALAN
Address: 6625 MIAMI LAKES DR. #233
City-St-Zip: MIAMI LAKES, FL 33014 USTitle: D (X) Delete
Name: WOSNESKI, ADAM
Address: 6625 MIAMI LAKES DR. #233
City-St-Zip: MIAMI LAKES, FL 33014 USTitle: D (X) Delete
Name: GOWKARRAN, SATIA
Address: 6625 MIAMI LAKES DR. #233
City-St-Zip: MIAMI LAKES, FL 33014 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: DP (X) Change () Addition
Name: BELL, IDA
Address: 12500 NE 15TH AVENUE, UNIT 305
City-St-Zip: NORTH MIAMI, FL 33161 USTitle: DT (X) Change () Addition
Name: FLORES, ANA
Address: 12500 NE 15TH AVENUE, UNIT 415
City-St-Zip: NORTH MIAMI, FL 33161 USTitle: DS (X) Change () Addition
Name: LATTI, MIKE
Address: 12500 NE 15TH AVENUE, UNIT 314
City-St-Zip: NORTH MIAMI, FL 33161 USTitle: DVP (X) Change () Addition
Name: SCHREIBER, ALAN
Address: 12500 NE 15TH AVENUE, UNIT 611
City-St-Zip: NORTH MIAMI, FL 33161 USTitle: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: ANA FLORES

DT

08/30/2009

Electronic Signature of Signing Officer or Director

Date