

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

**FILED  
Jan 12, 2007  
Secretary of State**

DOCUMENT# 717229

Entity Name: 821 - 82ND STREET CONDOMINIUM, INC.

**Current Principal Place of Business:**

825 NW 15TH STREET  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

825 NW 15TH STREET  
HOMESTEAD, FL 33030

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

MIRANDA, OSCAR  
825 NW 15TH STREET  
HOMESTEAD, FL 33030      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title:                      PD                      ( ) Delete  
Name:                      MIRANDA, OSCAR  
Address:                      825 NW 15TH STREET  
City-St-Zip:                      HOMESTEAD, FL 33030

Title:                      DV                      ( ) Delete  
Name:                      APONTE, CARLOS  
Address:                      821 82ND STREET NO 3  
City-St-Zip:                      MIAMI BEACH, FL 33141

Title:                      STD                      ( ) Delete  
Name:                      GERSHMAN, CAROL  
Address:                      3 ISLAND AVE APT 12-L  
City-St-Zip:                      MIAMI BEACH, FL 331395024

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: OSCAR MIRANDA

PD

01/12/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date