## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#718087** 

FILED Jan 31, 2007 Secretary of State

Entity Name: JAMES CENTRAL TOWERS CONDOMINIUM, ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2011 W 62ND ST HIALEAH, FL 33016 MIAMI BEACH, FL 33139 **Current Mailing Address: New Mailing Address:** C/O LJ SERVICES GROUP P.O. BOX 841437 PEMBROKE PINES, FL 33084 FEI Number: 59-1299143 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LJ SERVICES GROUP, CORP LJ SERVICES GROUP, CORP 245 18 ST 1045 KANE CONCOURSE MIAMI BEACH, FL 33139 #216 BAY HARBOR ISLANDS, FL 33154 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: LINDA JOHNSON 01/31/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MAARENO, EVANGELINA Name: Name: 245 18TH STE 1001 Address: Address: MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip: Title: VD Title: ( ) Delete () Change () Addition ESPINOSA, FRANCISCA Name: Name: Address: 2011 W 62ND ST #704 Address: City-St-Zip: HIALEAH, FL 33016 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition JACQUE, DELVA Name: JACQUE, DELVA Name: Address: 245 18TH ST. #902 Address: 245 18TH ST. #902 City-St-Zip: MIAMI BEACH, FL 33134 City-St-Zip: MIAMI BEACH, FL 33134 Title: () Delete Title: () Change () Addition LANIER, MARGARITA Name: Name: Address: 245 18TH STREET #1103 Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition INTAMA, LOUIS A ZACKMAN, MICHAEL Name: Name: 2011 W 62ND ST #604 245 18 STREET #501 Address: Address: City-St-Zip: HIALEAH, FL 33016 City-St-Zip: MIAMI BEACH, FL 33139

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: EVANGELINA MARERRO PD 01/31/2007