2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732061

FILED Jan 22, 2009 Secretary of State

Entity Name: RIO CRISTAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

453 SW 2ND STREET MIAMI, FL 33130

Current Mailing Address: New Mailing Address:

FEI Number: 59-1845564 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:

STUCKER, RAYMOND 453 SW 2ND STREET APT. 402 MIAMI, FL 33130 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:

- Flatonic Circulus of Davidson I Associ

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VPRE () Delete
 Title:
 PRE (X) Change () Addition

 Name:
 HERNANDEZ, SILVIA
 Name:
 STUCKER, RAYMOND

 Address:
 453 S.W. 2ND STREET, APT. 107
 Address:
 453 S.W. 2ND STREET, APT. 402

City-St-Zip: MIAMI, FL 33130 City-St-Zip: MIAMI, FL 33130

Title: PRES () Delete Title: VPRE (X) Change () Addition Name: STUCKER, RAYMOND Name: MEDRANO, RITA

Address: 453 S.W. 2ND STREET, APT. 404 Address: 453 S.W. 2ND STREET, APT. 404

City-St-Zip: MIAMI, FL 33130 City-St-Zip: MIAMI, FL 33130

Title: BM () Delete Title: SECR (X) Change () Addition Name: DIAZ, FRANCISCO Name: ALBA, CARLOS

Address: 453 S.W. 2ND STREET, APT. 106 Address: 453 S.W. 2ND STREET, APT. 106

City-St-Zip: MIAMI, FL 33130 City-St-Zip: MIAMI, FL 33130

Title: TRES (X) Delete Title: () Change () Addition

 Name:
 ALBA, CARLOS
 Name:

 Address:
 453 S.W. 2ND STREET, APT 101
 Address:

 City-St-Zip:
 MIAMI, FL 33130
 City-St-Zip:

Title: SECR (X) Delete Title: () Change () Addition

 Name:
 ALICIA, TOTH
 Name:

 Address:
 453 SW 2ND STREET, APT. 202
 Address:

 City-St-Zip:
 MIAMI, FL 33130
 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: RAYMOND STUCKER PRES 01/22/2009