2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#748739

FILED Aug 28, 2008 Secretary of State

Entity Name: 5825 CORINTHIAN CONDOMINIUM ASSOCIATION, INC.

New Principal Place of Business: Current Principal Place of Business: 5825 COLLINS AVENUE MIAMI BCH, FL 33140 **Current Mailing Address: New Mailing Address:** 5825 COLLINS AVENUE MIAMI BCH, FL 33140 FEI Number: 59-2022749 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SKRLD, INC 201 ALHAMBRA CIRCLE, 11TH FLOOR CORAL GABLES, FL 33134 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ESPINO, ENRIQUE Name: Name: Address: 5835 COLLINS AVE Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: Title: Title: () Delete () Change () Addition BENGOCHEA, GUSTAVO Name: Name: Address: 5825 COLLINS AVENUE Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: Title: () Delete Title: () Change () Addition VUELTA, XIOMARA Name: Name: Address: 5825 COLLINS AVE. Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: Title: AST () Delete Title: () Change () Addition DONAHUE, ROGER Name: Name: Address: 5825 COLLINS AVE. Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: Title: Title: () Delete () Change () Addition ABROMSON, MAURICE Name: Name: 5825 COLLINS AVE Address: Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: Title: () Delete Title: (X) Change () Addition BECENA, ALICIA MESA, NOLIS Name: Name: Address: 5825 COLLINS AVE Address: 5825 COLLINS AVE MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140 City-St-Zip: 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: ENRIQUE ESPINO P 08/28/2008