

748 739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

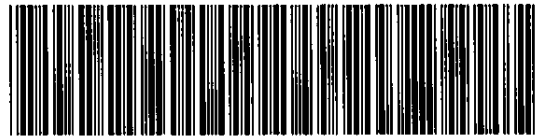
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900155983879

05/18/09--01012--002 \*\*35.00

RA Ro chy

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 MAY 18 AM 11:39

Roberts MAY 22 2009

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 5825 CORINTHIAN CONDOMINIUM ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** 748739

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deize Garbulla  
Name of Contact Person

Corinthian Condominium Association  
Firm/Company

5825 Collins Avenue  
Address

Miami Beach, FL 33140  
City/State and Zip Code

corinthian@the-beach.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deize Garbulla at ( 305 ) 865-3506  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: 5825 CORINTHIAN CONDOMINIUM ASSOCIATION, INC.

2. The principal office address: 5825 COLLINS AVE - MIAMI BEACH, FL 33140

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 8-31-79 Document number: 748739

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

SKRLD, Inc

201 ALHAMBRA CIRCLE, 11th FLOOR

CORAL GABLES, FL 33134

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
MAY 18 AM 11:39

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ALEJANDRO ESPINO, Esq.

VEZINA, LAWRENCE & PISCITELLI, P.A.

121 ALHAMBRA PLAZA - SUITE 1604

P.O. Box NOT acceptable

CORAL GABLES, FL 33326

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

+ E. d. Espino  
Signature of an officer or director

ENRIQUE ESPINO, President  
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

+ Alejandro Espino  
Signature of Registered Agent

5/13/09  
Date

If signing on behalf of an entity:

ALEJANDRO ESPINO  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314