

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Aug 12, 2009
Secretary of State**

DOCUMENT# 755340

Entity Name: MIDWAY VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:8400 NW 8 STREET
MIAMI, FL 33126 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 190901
MIAMI BEACH, FL 33119 US**New Mailing Address:**P.O. BOX 352466
MIAMI BEACH, FL 33135 US

FEI Number: 59-2285182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:ROSSI, KARLA
C/O LE SOLEIL MANAGEMENT, LLC
66 WEST FLAGLER STREET, SUITE 1002
MIAMI, FL 33130 US**Name and Address of New Registered Agent:**JANE, RAISA
C/O LE SOLEIL MANAGEMENT, LLC
1850 SW 8 STREET #208D
MIAMI, FL 33135 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: RAISA JANE

08/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: ROSSI, CARLA
Address: P.O. BOX 190901
City-St-Zip: MIAMI BEACH, FLTitle: S () Delete
Name: OVIEDO, MIRIAM
Address: P.O. BOX 190901
City-St-Zip: MIAMI BEACH, FLTitle: T () Delete
Name: CERVANTES, RUBEN
Address: P.O. BOX 190901
City-St-Zip: MIAMI BEACH, FLTitle: D (X) Delete
Name: FIGUEROA, ALEJO
Address: P.O. BOX 190901
City-St-Zip: MIAMI BEACH, FLTitle: D (X) Delete
Name: DELGADO, ARMANDO
Address: P.O. BOX 190901
City-St-Zip: MIAMI BEACH, FL**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: JANE, RAISA
Address: P.O. BOX 352466
City-St-Zip: MIAMI, FL 33135Title: T (X) Change () Addition
Name: SANQUINTIN, ALTAGRACIA
Address: P.O. BOX 352466
City-St-Zip: MIAMI, FL 33135Title: S (X) Change () Addition
Name: DIAZ, NAYMI
Address: P.O. BOX 352466
City-St-Zip: MIAMI, FL 33135Title: () 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 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: RAISA JANE

P

08/12/2009

Electronic Signature of Signing Officer or Director

Date