

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Nov 21, 2012
Secretary of State**

DOCUMENT# 760169

Entity Name: NINE ISLAND AVENUE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**9 ISLAND AVENUE, BELLE ISLE
OFFICE
MIAMI BEACH, FL 33139**New Principal Place of Business:****Current Mailing Address:**9 ISLAND AVENUE, BELLE ISLE
OFFICE
MIAMI BEACH, FL 33139**New Mailing Address:****FEI Number:** 59-2196288**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HYMAN & MARS, LLP
150 WEST FLAGLER STREET
TWENTY-SEVENTH FLOOR
MIAMI, FL 33130 US**Name and Address of New Registered Agent:**

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:****Title:** PRES
Name: STOKOLS, JEFFERY
Address: 9 ISLAND AVE.
City-St-Zip: MIAMI BEACH, FL 33139**Title:** VP
Name: KOEBERNIK, HEINZ
Address: 9 ISLAND AVE.
City-St-Zip: MIAMI BEACH, FL 33139**Title:** SEC
Name: MICHELE, WEHE
Address: 9 ISLAND AVE.
City-St-Zip: MIAMI BEACH, FL 33139**Title:** TREA
Name: VASQUEZ, CECILIA
Address: 9 ISLAND AVE
City-St-Zip: MIAMI BEACH, FL 33139**Title:** DIR
Name: ROSENSTEIL, BLANKA
Address: 9 ISLAND AVE
City-St-Zip: MIAMI BEACH, FL 33139

I hereby 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 all other like empowered.

SIGNATURE: JEFFERY STOKOLS

PRES

11/21/2012

Electronic Signature of Signing Officer or Director_____
Date