2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 02, 2007 8:00 am Secretary of State 04-02-2007 90066 029 ****61.25

DOCL	IMEN	JT #7	67070	

1. Entity Name

EXPO TOWERS CONDOMINIUM ASSOCIATION INC



EXPOIC	WERS C	ONDOWNING AS	SOCIATION, IN	iC.								
Principal Plac -2295 WEST HIALEAH, FL	59 PLCE			- AMERICAN MANAGEMENT & REALTY, INC - 2240 W. 54 PLACE				400	48546			
			,				i					
		ess - No P.O. Box #	3. Mailing Address	can M	nnaa	PNON	<i>></i> IIII					
Suite, Apt.		W CO I DOC D	Suite, Apt. #, et	C.	anag	reet	. 02262	007 (Chg-NP	CR2	E037 (12/06)	
City & State	θ ,	 ,	Gity & State	est 62	····· &/	reel	4. FEIN				· · · · ·	plied For
Hial	<u>eah</u>	+ L	Higlea	h, FA	<u>ر</u>			26749	51		J	t Applicable
320	ا ماد	Country U.S.A	33016		intry S, A		5. Certi	ificate of	Status Desired	1	\$8.75 Add Fee Require	
	6. Name	and Address of Current I	Registered Agent				7. Nam	e and Ad	idress of Nev	v Registen	ed Agent	
AMERICAI	N MANAG	EMENT & REALTY, I	INC		Name							
2011 WES HIALEAH,		•			Street A	ddress (P	.O. Box 1	Number i	s Not Accepta	ıble)		
,												
					City	* **				F	Zip Code	9
8. The above	named entity	submits this statement for	the purpose of chang	ing its registe:	od office o	r registere	d agent,	or both,	in the State of	Florida. I	am familiar with,	and accept
the obligat	ions of regist	ered agent.										
SIGNATURE .												
	Signature, typed	or printed name of registered agent a	nd trie if applicable.	(NOTE: Registe	1 Agent signat	ure required w	rhen reinstat	ting)		DA	TE	
	_	e is \$61.25		on Campaign F Fund Contribut			5.00				eck payable to	
10.	Due by M	OFFICERS AND DIR		11.			Added to				partment of St	
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12. I hereby o	ertify that the	information supplied with	this filing does not go	alify for the exe	emptions c	ontained is	n Chante	ar 110 F	orida Statutor	1 further	Cartify that the in	formation
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 req. I by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if												

changed, or on an attachment with an address, with all other like empowered.

Date