2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000003009

FILED Mar 16, 2009 Secretary of State

Entity Name: BARLOVENTO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

10745 S.W 3RD ST. 7001 SW 87 CT

APT #6 MIAMI, FL 33173 US

MIAMI, FL 33174

Current Mailing Address: New Mailing Address:

10745 S.W 3RD ST. P.O.BOX 440067

APT #6 MIAMI, FL 33144 US MIAMI, FL 33174

FEI Number: 65-1028475 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 UMANA, SANTOS
 PEREZ-SIAM, FRANK

 10745 SW 3RD ST.#6
 7001 SW 87 CT

 MIAMI, FL 33174
 US

 MIAMI, FL 33173
 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: FRANK PEREZ-SIAM 03/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 SANTOS, UMANA
 Name:
 SANTOS, UMANA

 Address:
 10745 S.W 3RD ST.#6
 Address:
 7001 SW 87 CT

 City-St-Zip:
 MIAMI, FL 33174
 City-St-Zip:
 MIAMI, FL 33144 US

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 ESPINOSA, ROSELINO
 Name:
 ESPINOSA, ROSELINO

 Address:
 10745 SW 3RD ST., APT. #5
 Address:
 7001 SW 87 CT

 City-St-Zip:
 MIAMI, FL 33174
 City-St-Zip:
 MIAMI, FL 33173 US

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 MAGALIS, RIVERA
 Name:
 MAGALIS, RIVERA

 Address:
 10745 S.W 3RD ST.#2
 Address:
 7001 SW 87 CT

 City-St-Zip:
 MIAMI, FL 33144
 City-St-Zip:
 MIAMI, FL 33173 US

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: SANTOS UMANA PD 03/16/2009