2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 31, 2007
Secretary of State

DOCUMENT# N00921

Entity Name: PATIOS WEST ONE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2510 NW 97TH AVE
200
DORAL, FL 33172 US

New Principal Place of Business:

275 FONTAINEBLEAU BLVD
151
MIAMI, FL 33172 US

Current Mailing Address:

C/O GOLD PROPERTY MANAGEMENT & ASSOCIATES
275 FONTAINEBLEAU BLVD., SUITE 151
MIAMI, FL 33172

New Mailing Address:

FEI Number: 59-2359581 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALVAREZ, ELIANA
C/O EXCEL MANAGEMENT
2510 NW 97TH AVE, # 200
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

GOLD PROPERTY MANAGEMENT & ASSOCIATES, INC
275 FONTAINEBLEAU BLVD
151
MIAMI, FL 33172 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: GOLD PROPERTY MANAGEMENT & ASSOCIATES, INC 07/31/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: ROGUE, GLORIA
Address: 11051 NW 7TH STREET #101
City-St-Zip: MIAMI, FL 33172

Title: PD ( ) Delete
Name: DEL VALLE, ALAIN
Address: 11051 NW 7TH STREET #102
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete
Name: SILVA, CESAR
Address: 11103 NW 7TH STREET #105
City-St-Zip: MIAMI, FL 33172

Title: TD ( ) Delete
Name: GARCIA, GILBERTO
Address: 11103 NW 7TH STREET #201
City-St-Zip: MIAMI, FL 33172

Title: SD ( ) Delete
Name: CAMPS, NOELIA
Address: 11123 NW 7TH STREET #103
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete
Name: MORALES, ESTHER
Address: 11113 NW 7TH STREET #201
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) 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: ALAIN DEL VALLE P 07/31/2007
Electronic Signature of Signing Officer or Director Date