

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 22, 2007  
Secretary of State**

DOCUMENT# N01000003864

Entity Name: MATILDA-3000 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3150 MATILDA STREET  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

3150 MATILDA STREET  
MIAMI, FL 33133

**New Mailing Address:**

FEI Number: 65-1114233      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CRAWFORD, JEROME  
3150 MATILDA STREEET  
MIAMI, FL 33133      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: D      ( ) Delete  
Name: JUAN, OLIVIA  
Address: 3152 MATILDA ST  
City-St-Zip: MIAMI, FL 33133

Title: D      ( ) Delete  
Name: JUAN, MIGUEL  
Address: 3152 MATILDA ST  
City-St-Zip: MIAMI, FL 33133

Title: D      ( ) Delete  
Name: CRAWFORD, JEROME  
Address: 3150 MATILDA STREET  
City-St-Zip: MIAMI, FL 33133

Title: D      ( ) Delete  
Name: PARRIS, MICHAEL  
Address: 3150 MATILDA STREET  
City-St-Zip: MIAMI, FL 33133

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JEROME CRAWFORD

DIR.

01/22/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date