
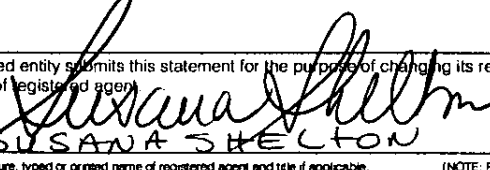



**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

04-14-2008 90068 024 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                      |                                                                                                                                                                                 |                                                                                                                                                                 |
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| DOCUMENT # N01000009051                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                      |                                                                                                |                                                                                                                                                                 |
| 1. Entity Name<br>COSTA DEL MAR CONDOMINIUM ASSOCIATION, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                      |                                                                                                                                                                                 |                                                                                                                                                                 |
| Principal Place of Business<br>7921 HARDING AVE<br>MIAMI BEACH, FL 33141                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                      | Mailing Address<br>145 MADEIRA AVENUE<br>#206<br>CORAL GABLES, FL 33134                                                                                                         |                                                                                                                                                                 |
| 2. Principal Place of Business - No P.O. Box #<br>#94 HARDING AVE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                      | 3. Mailing Address<br>1100 EL RADO                                                                                                                                              |                                                                                                                                                                 |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                      | Suite, Apt. #, etc.                                                                                                                                                             |                                                                                                                                                                 |
| City & State<br>MIAMI BEACH FL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                      | City & State<br>CORAL GABLES, FL                                                                                                                                                |                                                                                                                                                                 |
| Zip<br>33141                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                      | Country<br>U.S.A.                                                                                                                                                               |                                                                                                                                                                 |
| Zip<br>33134                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                      | Country<br>U.S.A.                                                                                                                                                               |                                                                                                                                                                 |
| 4. FEI Number<br>NOT APPLICABLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                      | Applied For<br>Not Applicable                                                                                                                                                   |                                                                                                                                                                 |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                      | \$8.75 Additional Fee Required                                                                                                                                                  |                                                                                                                                                                 |
| 6. Name and Address of Current Registered Agent<br>FERNANDEZ, SUSANA<br>145 MADEIRA AVENUE<br>SUITE 206<br>CORAL GABLES, FL 33134                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                      | 7. Name and Address of New Registered Agent<br>Name SUSANA SHELTON<br>Street Address (P.O. Box Number is Not Acceptable)<br>1100 EL RADO<br>City CORAL GABLES FL Zip Code 33134 |                                                                                                                                                                 |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                      |                                                                                                                                                                                 |                                                                                                                                                                 |
| SIGNATURE <br>SUSANA SHELTON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                      | DATE<br>3/11/08                                                                                                                                                                 |                                                                                                                                                                 |
| Filing Fee is \$61.25<br>Due by May 1, 2008                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                      | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                    |                                                                                                                                                                 |
| Make check payable to Florida Department of State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                      |                                                                                                                                                                                 |                                                                                                                                                                 |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                      | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10                                                                                                                           |                                                                                                                                                                 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | PD<br>PAPAYANNIS, PERIDES<br>33 HUDSON STREET APT 1901 EAST<br>JERSEY CITY, NJ 07302 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                  | VP<br>JAMES BROWN <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                                                                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VD<br>BONDAROFF, SHAMARA<br>135 N 10TH STREET APT 7<br>NEW YORK, NY 10014 <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                  | ST<br>PERICLES PAPAYANNIS<br>33 HUDSON ST, APT 1901 EAST, JERSEY<br>CITY, NJ 07302 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | STD<br>SAN JUAN, LARRY<br>7921 HARDING AVE, #301<br>MIAMI BEACH, FL 33141 <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                  | P<br>SHAMARA BONDAROFF<br>135 N 10TH ST, APT 7 NEW YORK<br>NY, 10014 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                               |
| 12. I hereby certify that the information supplied with this filing 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 required 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. |                                                                                                                      |                                                                                                                                                                                 |                                                                                                                                                                 |
| SIGNATURE: <br>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                      | DATE<br>3/25/08<br>Daytime Phone #<br>917 273 7374                                                                                                                              |                                                                                                                                                                 |