## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N02000009906

FILED Aug 07, 2008 Secretary of State

Entity Name: SUNRISE AT SUNSET VIEW CONDOMINIUM ASSOCIATION, INC.

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

7540 SW 152 AVE MIAMI, FL 33193

**Current Mailing Address:** 

7540 SW 152 AVE

MIAMI, FL 33193

13831 SW 59 ST.

MIAMI, FL 33183 US

SUITE 106

FEI Number: 41-2109396

LANDRIAN, FRANK CAM

FEI Number Applied For ( )

FEI Number Not Applicable ( )

106

13831 SW 59 ST

MIAMI, FL 33183

**New Mailing Address:** 

Certificate of Status Desired ( )

Name and Address of New Registered Agent:

PRESTIGE ASSOCIATION CONSULTANTS, INC. 13831 SW 59 ST.

SUITE 106

MIAMI, FL 33183 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 LANDRIAN

Name and Address of Current Registered Agent:

08/07/2008

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

() Delete RODRIGUEZ, JULIO E Name: 13831 SW 59 ST. #106 Address:

City-St-Zip: MIAMI, FL 33183 Title: () Delete

Name: GONZALEZ, OSNIEL Address: 13831 SW 59 ST. #106 City-St-Zip: MIAMI, FL 33183

Title: () Delete HOWELL, BEATRIZ Name:

13831 SW 59 ST. #106 Address: City-St-Zip: MIAMI, FL 33183

Title: ( ) Delete Name: OLIVERA, MARISSA

Address: 13831 SW 59 ST. #106 City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

OLIVERA, MARISSA Name: Address: 13831 SW 59 ST. #106 City-St-Zip: MIAMI, FL 33183

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: (X) Change ( ) Addition

Name: NICOLAS, MODESTA Address: 13831 SW 59 ST. #106 City-St-Zip: MIAMI, FL 33183

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: MARISSA OLIVERA **PRES** 08/07/2008