## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000008830

Apr 27, 2007 Secretary of State

Entity Name: TAMIAMI COMMERCE CENTER A & B CONDOMINIUM ASSOCIATION, INC.

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

13601 SW 143 CT., SUITE 105 13601 SW 143 COURT, SUITE 105

MIAMI, FL 33186 MIAMI, FL 33186

**Current Mailing Address: New Mailing Address:** 

435 SW 123RD AVENUE MIAMI, FL 33184

FEI Number: 20-1092934 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:

C R MANAGEMENT & INVESTMENT, INC. 435 SW 123RD AVENUE MIAMI, FL 33184

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

DELGADO, ELISEO DELGADO, ELISEO Name: Name:

13601 SW 143 CT., SUITE 105 Address: 13601 SW 143 COURT, SUITE 105 Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

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

Name: AMION, MIGUEL Name: AMION, MIGUEL

Address: 13651 SW 143 CT., SUITE 238 Address: 13651 SW 143 COURT, SUITE 238

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

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

ALI, HASNAIN Name: ALI, HASNAIN Name:

13601 SW 143 CT., SUITE 103 13601 SW 143 COURT, SUITE 103 Address: Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

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: ELISEO DELGADO PD 04/27/2007