## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000010925

FILED Nov 19, 2008 Secretary of State

Entity Name: PARADISE POINTE CONDOMINIUM ASSOCIATION, INC.

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

12350 SW 132 COURT 8600 NW 17 STREET SUITE 114 SUITE 170

MIAMI, FL 33186 DORAL, FL 33126

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

12350 SW 132 COURT 8600 NW 17 STREET SUITE 114 SUITE 170 MIAMI, FL 33186 DORAL, FL 33126

FEI Number: 20-1313921 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HALBERG, MICHAEL EISINGER, BROWN, LEWIS, AND FRANKEL, PA 10800 BISCAYNE BLVD. 4000 HOLLYWOOD BLVD SUITE 988 SUITE 265-S

HOLLYWOOD, FL 33021 US MIAMI, FL 33161 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: DENNIS EISINGER 11/19/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete CAIRO, MERCEDES CAIRO, MERCEDES Name: Name: 12350 SW 132 CT SUITE 114 Address: 8600 NW 17 STREET, SUITE 170 Address:

MIAMI, FL 33186 DORAL, FL 33126

City-St-Zip: City-St-Zip:

Title: VP&T () Delete Title: (X) Change ( ) Addition GONZALEZ, ALBERT Name: GONZALEZ, ALBERT Name:

Address: 12350 SW 132 CT. #114 Address: 8600 NW 17 STREET, SUITE 170

City-St-Zip: MIAMI, FL 33186 City-St-Zip: DORAL, FL 33126

Title: SEC () Delete Title: S/D (X) Change ( ) Addition COLLAZO, PEDRO GARCIA, JOSE Name: Name:

12350 SW 132 CT. #114 8600 NW 17 STREET, SUITE 170 Address: Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: DORAL, FL 33126

Title: () Delete Title: P/D ( ) Change (X) Addition

Name: Name: PICHS, XAVIER

8600 NW 17 STREET, SUITE 170 Address: Address:

City-St-Zip: City-St-Zip: DORAL, FL 33126

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: XAVIER PICHS P/D 11/19/2008