

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004621

FILED  
Mar 28, 2006  
Secretary of State

Entity Name: MONTERREY CONDOMINIUM PROPERTY ASSOCIATION, INC.

**Current Principal Place of Business:**

1611 MICHIGAN AVE  
MIAMI BCH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BLUE SKY MIAMI 820 EUCLID AVE  
STE 104  
MIAMI BCH, FL 33139

**New Mailing Address:**

1611 MICHIGAN AVE  
MIAMI BCH, FL 33139

FEI Number: 20-1140114

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MICHAEL, GOMEZ  
1930 TYLER ST  
HOLLYWOOD, FL 33139 US

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

CHRISTIAN, FOLLAND ESQ  
747 4 TH STREET #200  
MIAMI BEACH, FL 33139 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: CF / M

03/28/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: ROUSSEAU, DANIEL  
Address: 747 4TH ST STE 200-A  
City-St-Zip: MIAMI BCH, FL 33139

Title: DV ( ) Delete  
Name: DESNICK, JAMES  
Address: 747 4TH ST STE 200-A  
City-St-Zip: MIAMI BCH, FL 33139

Title: DS ( ) Delete  
Name: FOLLAND, CHRISTIAN  
Address: 747 4TH ST STE 200-A  
City-St-Zip: MIAMI BCH, FL 33139

**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:

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: CF / M

D

03/28/2006

Electronic Signature of Signing Officer or Director

Date