

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008549

FILED
Mar 09, 2009
Secretary of State

Entity Name: 107 AVENUE OFFICE PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9560 SW 107TH AVE
MIAMI, FL 33176

New Principal Place of Business:

9000 SW 152 STREET
SUITE 102
MIAMI, FL 33156

Current Mailing Address:

12595 SW 137 AVE
112
MIAMI, FL 33186

New Mailing Address:

9000 SW 152 STREET
SUITE 102
MIAMI, FL 33156

FEI Number: 02-0546891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRICE, IRA A
9560 S.W. 107 AVE #202
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PRICE, IRA
Address: 9560 SW 107 AVE #202
City-St-Zip: MIAMI, FL 33176

Title: VD () Delete
Name: CARMONA, FELIPE
Address: 9560 SW 107TH AVE #204
City-St-Zip: MIAMI, FL 33176

Title: S () Delete
Name: MEJIDO, JUDY
Address: 9560 SW 107TH AVE #205
City-St-Zip: MIAMI, FL 33176

Title: T (X) Delete
Name: DORMAN, LAURENCE
Address: 9560 SW 107TH AVE #205
City-St-Zip: MIAMI, FL 33176

Title: D (X) Delete
Name: CUBAS, ALFA
Address: 9560 SW 107TH AVE #205
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PRICE, IRA
Address: 9560 SW 107 AVE #A-201
City-St-Zip: MIAMI, FL 33176

Title: SD (X) Change () Addition
Name: DORMAN, LAWRENCE
Address: 9570 SW 107TH AVE #C-103
City-St-Zip: MIAMI, FL 33176

Title: TD (X) Change () Addition
Name: MEJIDO, JUDY
Address: 9560 SW 107TH AVE #A-205
City-St-Zip: MIAMI, FL 33176

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 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: IRA PRICE

P

03/09/2009

Electronic Signature of Signing Officer or Director

Date