2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010027

Entity Name: BAIA CONDOMINIUM ASSOCIATION, INC.

FILED Mar 07, 2008 Secretary of State

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

411 MICHIGAN AVENUE 930 - 10 STREET MIAMI BEACH, FL 33139 9

MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

411 MICHIGAN AVENUE 930 - 10 STREET

MIAMI BEACH, FL 33139 9

MIAMI BEACH, FL 33139

FEI Number: 20-5861806 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:

SHERMAN, THOMAS G ESQ MIARECKI, MICHAEL J 930-10 STREET

CORAL GABLES, FL 33134 US 5
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: MICHAEL MIARECKI 03/07/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANG

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HARARI, PHILIPPE
 Name:
 MAES, PABLO V

 Address:
 411 MICHIGAN AVENUE
 Address:
 930-10 STREET # 6

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

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

 Name:
 HARARI, ERIC
 Name:
 MIARECKI, MICHAEL J

 Address:
 1320 S. BISCAYNE POINT ROAD
 Address:
 930-10 STREET # 5

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:
 MIAMI BEACH, FL 33139

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

 Name:
 HARARI, LAURENT
 Name:
 MOHAMMED, JOAN

 Address:
 1320 S. BISCAYNE POINT ROAD
 Address:
 930-10 STREET # 2

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:
 MIAMI BEACH, FL 33139

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: MIARECKI MICHAEL J PD 03/07/2008