

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Dec 02, 2009  
Secretary of State**

DOCUMENT# N08000001744

Entity Name: MET 1 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

300 SOUTH BISCAYNE BOULEVARD  
C/O MANAGEMENT OFFICE  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

300 SOUTH BISCAYNE BOULEVARD  
C/O MANAGEMENT OFFICE  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 26-2064717      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STEARNS WEAVER MILLER WEISSLER ALHADEFF &  
SITTERSON, P.A. C/O RICHARD E. SCHATZ  
150 WEST FLAGLER STREET - SUITE 2200  
MIAMI, FL 33130 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: GLAS, RICARDO D  
Address: 300 SOUTH BISCAYNE BOULEVARD 210  
City-St-Zip: MIAMI, FL 33131  
  
Title: VTD ( ) Delete  
Name: PULENTA, LUIS A  
Address: 9090 SOUTH DADELAND BOULEVARD # 210  
City-St-Zip: MIAMI, FL 33131  
  
Title: SD ( ) Delete  
Name: WELLER, TIMOTHY  
Address: 9090 SOUTH DADELAND BOULEVARD # 210  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: PULENTA, LUIS A  
Address: 9090 SOUTH DADELAND BOULEVARD # 210  
City-St-Zip: MIAMI, FL 33156  
  
Title: VTD (X) Change ( ) Addition  
Name: WELLER, TIMOTHY  
Address: 9090 SOUTH DADELAND BOULEVARD # 210  
City-St-Zip: MIAMI, FL 33156  
  
Title: SD (X) Change ( ) Addition  
Name: MONROS, JOSE  
Address: 9090 SOUTH DADELAND BOULEVARD # 210  
City-St-Zip: MIAMI, FL 33156

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: HOLGER LUTZ

CAM

12/02/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date