2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N94000004850

1. Entity Name

ROMIR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

12101 NW 98TH AVE HIALEAH GARDENS, FL 33018 Mailing Address

12101 NW 98TH AVE HIALEAH GARDENS, FL 33018

FILED May 02, 2007 08:00 AM Secretary of State



04292007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0582210 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTINEZ, MARIO 12101 NW 98TH AVE #2 HIALEAH GARDENS, FL 33018

SIGNATURE

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				IN THIS STAGE		
8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registered	Agent signature	required when reinstating)	DATE	
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financ Trust Fund Contribution.		\$5.00 May Be Added to Fees	000000757626 05/23/07-80079-004 61.25	
10.	OFFICERS AND DIRECT	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MARTINEZ, MARIO 12101 NW 98TH AVE #2 HIALEAH GARDENS, FL 33018					
NAME STREET ADDRESS CITY-ST-ZIP	P VEGA, ROLANDO 2975 SW 129 AVENUE MIAMI, FL 33175		DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VEGA, MIREYA 12101 NW 98TH STREET, #1 HIALEAH GARDENS, FL 33018					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-S1-ZIP						
TITLE NAME						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attackment with an address, with full other like empowered.

MARIO MARTINES

AME OF SIGNING OFFICER OR DIRECTOR