

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005458

FILED
Jan 25, 2009
Secretary of State

Entity Name: CARIBBEAN WAREHOUSE CENTER CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business:

6905-21 N.W. 52 STREET
MIAMI, FL 33166

New Principal Place of Business:

6905-41 N.W. 52 STREET
MIAMI, FL 33166

Current Mailing Address:

P.O. BOX 228055
ATTN: M. PALACIOS
MIAMI, FL 33222

New Mailing Address:

FEI Number: 65-1153721 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MP PROPERTY MANAGEMENT
8390 NW 53 ST 313
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

MP PROPERTY MANAGEMENT
8390 NW 53 ST 313
DORAL, FL 33166 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: MYRIAM PALACIOS

01/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: ABAD, JAIME
Address: 6917 NW 52ST
City-St-Zip: MIAMI, FL 33166

Title: VPD () Delete
Name: BERNEY, MARTHA
Address: 6925 NORTHWEST 52 STREET
City-St-Zip: MIAMI, FL 33166

Title: TD () Delete
Name: TORMES, FRANCISCO
Address: 6913 NW 52 STREET
City-St-Zip: MIAMI, FL 33166

Title: SD () Delete
Name: RALUY, ANTONIO
Address: 6921 N.W. 52 ST
City-St-Zip: MIAMI, FL 33166

Title: VP () Delete
Name: MONSANTE, ARTURO
Address: 6941 NW 52 ST
City-St-Zip: MIAMI, FL 33166

Title: VP () Delete
Name: GILDEN, TODD
Address: 6929 NW 52 ST
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: BERNEY, MARTHA
Address: 6925 NW 52 STREET
City-St-Zip: MIAMI, FL 33166

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: FRANK TORMES

T

01/25/2009

Electronic Signature of Signing Officer or Director

Date