2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

SIGNATURE:

FILED **DOCUMENT #716782** 2007 OCT 29 AM II: 04 STAR MERIDIAN CONDOMINIUM, INC. SECRETARY OF STALE TALLAHASSEE. FLORIDA Principal Place of Business Mailing Address 528 MERIDIAN AVENUE **305 ALCAZAR AVE** MIAMI BEACH, FL 33139 US US MIAMI, FL 33134 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 10232007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-1441200 City & State City & State Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name VILAR PROPERTY MANAGEMENT, INC. Street Address (P.O. Box Number is Not Acceptable) 305 ALCAZAR AVE CORAL GABLES, FL 33134 Zip Code 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 9. Election Campaign Financing Make check payable to \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 DVP TITLE Delete Change Addition TITLE. DIAZ RAPael AVE # 528 Werldinn AVE # HIAMI BEACH, Fln 33139 RUIZ, MATHEW NAME NAME STREET ADDRESS 528 MERIDIAN AVE 403 STREET ADDRESS MIAMI BEACH, FL 33139 CITY-ST-ZIP CITY-ST-ZIP Delete Addition TITLE TITLE Change ODRIGUEZ, MARGARITA 28 HERIDIAN AUE # WIAMI BEACH, FTA NAME GAZZONI, JUDITH NAME STREET ADDRESS 528 MERIDIAN AVE 502A STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 CITY-ST-ZIP - 51) TITLE ☐ Delete DITLE ☐ Change Addition BACHA, HENRY NAME NAME 100112031471 11/06/07--01016--019 **61.25 STREET ADDRESS **528 MERIDIAN AVE #304** STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 CITY-ST-ZIP Betancourt, Estela , 528 HERIGIAN AVE H HIAMI BEACH. FID TITLE ☐ Change Delete TITLE LO PEE, CARLOS NAME NAME STREET ADDRESS 528 MERIDIAN AVE 502 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition SPIELER, RICHARD NAME NAME STREET ADDRESS 1177 E 56 ST STREET ADDRESS BROOKLYN, NY 11234 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filling 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 attachmen

R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR