

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012082

FILED
Jan 25, 2009
Secretary of State

Entity Name: SAKHIL CENTER AT DORAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3300 NW 112 AVE
UNIT 1-13
MIAMI, FL 33172

New Principal Place of Business:

3300 NW 112 AVE
UNIT 1-13
DORAL, FL 33172

Current Mailing Address:

P.O. BOX 228055
MIAMI, FL 33172

New Mailing Address:

P.O. BOX 228055
MIAMI, FL 33222

FEI Number: 20-8344482

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 STE 313
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

MP PROPERTY MANAGEMENT
8390 NW 53 ST STE 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: D () Delete
Name: KILNANI, SURESH
Address: 3300 NW 112 AVE. #13
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: SAKHRANI, MANOHAR
Address: 3300 NW 112 AVE. #13
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: KILNANI, MEENU
Address: 3300 NW 112 AVE., #13
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SURESH KILNANI

P

01/25/2009

Electronic Signature of Signing Officer or Director

Date