

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711561

FILED
Mar 05, 2009
Secretary of State

Entity Name: 626 CONDOMINIUM INCORPORATED

Current Principal Place of Business:

626 MERIDIAN AVENUE
MIAMI BEACH, FL

New Principal Place of Business:

Current Mailing Address:

CAM MANAGEMENT SERVICES
PO BOX 5103
HIALEAH, FL 330141103

New Mailing Address:

FEI Number: 59-2040322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, ANITA
CAM MANAGEMENT SERVICE CORP
6175 NW 167 ST UNIT G1
HIALEAH, FL 33012 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: MOLINA, RUBEN
Address: PO BOX 1437
City-St-Zip: MIAMI BEACH, FL 33139

Title: TSD () Delete
Name: MOLINA, ONEYDA
Address: PO BOX 1437
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: DACOMO, RODOLFO
Address: 626 MERIDIAN AVENUE
City-St-Zip: MIAMI BEACH, FL

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: RUBEN MOLINA

PD

03/05/2009

Electronic Signature of Signing Officer or Director

Date