2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N05000007440

1. Entity Name
IBIZA VILLAGE CONDOMINIUM ASSOCIATION, INC.

FILED
09 MAR 27 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
~~7003 N. WATERWAY DR.~~ ~~SUITE 219~~ ~~MIAMI, FL 33155~~	PO BOX 144730 MIAMI, FL 33114

REINSTATEMENT 08-09

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
300 SEVILLA AVENUE	SAME
Suite, Apt. #, etc.: 202	Suite, Apt. #, etc.: SAME
City & State: CORAL GABLES, FL	City & State: SAME
Zip: 33134 Country: USA	Zip: SAME Country: SAME

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NAVARRO, BERNARDO ~~7003 N. WATERWAY DRIVE~~ 300 SEVILLA AVENUE ~~SUITE 219~~ SUITE 202 ~~MIAMI, FL 33155~~ CORAL GABLES, FLORIDA 33134	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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

FILE NOW!!! FEE IS $122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NAVARRO, BERNARDO 300 SEVILLA AVE ~~7003 N. WATERWAY DRIVE SUITE 219~~ SUITE 202 ~~MIAMI, FL 33155~~ CORAL GABLES, FL 33134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CERRA, MIGUEL 7003 N. WATERWAY DRIVE SUITE 219 MIAMI, FL 33155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 800147722578 03/27/09--01032--025 **122.50
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HUEMBES, HORACIO C 7003 N. WATERWAY DRIVE SUITE 219 MIAMI, FL 33155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 attachment with an address, with all other like empowered.

SIGNATURE: _____ BERNARDO NAVARRO 3/13/09 439-5829
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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