2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: 1/2

Apr 16, 2007 8:00 am Secretary of State **DOCUMENT #706651** 04-16-2007 90325 035 ****61.25 1. Entity Name ASTOR CONDOMINIUM NO 2 INC Mailing Address Principal Place of Business 4000 3500 HARRISON STREET 819 N 31 ROAD APT. #2 HOLLYWOOD, FL 33021 US HOLLYWOOD, FL 33021 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04022007 Chq-NP CR2E037 (12/06) City & State City & State FEI Number 59-6169262 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Age 7. Name and Address of New Registered Agent Name BAILEY, ROBERT V N 31 ROAD SIG N 31 ROAD Street Address (P.O. Box Number is Not Acceptable) N 31 ROAD HOLLYWOOD, FL 33021 City Zip Code FL 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 arm familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution Florida Department of State Due by May 1, 2007 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 SDT TITLE TITLE ☐ Delete BAILEY, ROBERT V NAME NAME STREET ADDRESS 819 N 31 ROAD STREET ADORESS CITY-ST-7IP HOLLYWOOD, FL 33021 CITY-ST-ZIP PD MARVIN AVILA 3500 HARRISON ST #11 Delete TITLE TITLE ☐ Change ▼ Addition RAME VELEZ, MARIA NAME STREET ADDRESS **5711 SIMMS ST** STREET ADDRESS HOLLYWOOD, FL+33024 CITY-ST-7P HOLLYWOOD FL 33021 CITY-ST-ZIP ☐ Defete TITLE TITLE Change ☐ Addition BLOCKER, MARY NAME NAME 5520 SW 28 TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33312 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SANDERS, ANNETTE NAME STREET ADDRESS 3500 HARRISON ST 12A STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 attactment with an address, with all other like empowered.

4-11-07 954-562-4668
Detre Detre