2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jul 09, 2007 **DOCUMENT# 707286** Secretary of State

Entity Name: FOUNTAINVIEW ASSOCIATION INC #2 A CONDOMINIUM

Current Principal Place of Business: New Principal Place of Business: 16801 N.E. 14TH AVE. APT. 103 NORTH MIAMI BEACH, FL 33162 US **New Mailing Address: Current Mailing Address:** 16801 N.E. 14TH AVE. APT. #103 NORTH MIAMI BEACH, FL 33162 US FEI Number: 59-1103623 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GUEVARA, JOSE 16801 NE 14TH AVE **APT 103** MIAMI, FL 33162 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GUEVARA, JOSE Name: Name: 16801 NE 14TH AVE APT 103 Address: Address: City-St-Zip: NORTH MIAMI, FL 33162 City-St-Zip: Title: () Delete Title: () Change () Addition GONZALEZ, ANDRES Name: Name: Address: 16801 NE 14TH AVE APT 206 Address: City-St-Zip: NORTH MIAMI, FL 33162 City-St-Zip: Title: T/D () Delete Title: () Change () Addition RODRIGUEZ, ROGER Name: Name: 16801 NE 14TH AVE APT 109 Address: Address: City-St-Zip: NORTH MIAMI, FL 33162 City-St-Zip: (X) Change () Addition Title: S/D () Delete Title: S/D Name: RAMIREZ, JACKSON Name: MASSES, CLARA 16801 NE 14 AVE APT 212 Address: 16801 NE 14 AVE APT 201 Address: City-St-Zip: NORTH MIAMI, FL 33162 City-St-Zip: NORTH MIAMI, FL 33162 Title: () Delete Title: () Change () Addition HERBELLA, OSCAR Name: Name: 16801 NE 14TH AVE APT 205 Address: Address: City-St-Zip: NORTH MIAMI, FL 33162 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: JOSE GUEVARA P/D 07/09/2007