

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715997

FILED  
May 18, 2009  
Secretary of State

Entity Name: MIAMI PARK VIEW HOUSE INC.

**Current Principal Place of Business:**

1229 MERIDIAN AVE  
APT #8  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

1229 MERIDIAN AVE  
APT #8  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

CINTO, JAMES  
1229 MERIDIAN AVE #8  
MIAMI BEACH, FL 33139 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:**

Title: TD ( ) Delete  
Name: BURKHOLDER, JON SCOTT  
Address: 1229 MERIDIAN AVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD ( ) Delete  
Name: BURLEY, MELISSA  
Address: 1229 MERIDIAN AVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: PD ( ) Delete  
Name: CINTO, JAMES D  
Address: 1229 MERIDIAN AVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP ( ) Delete  
Name: JALLAIS, LAURENT  
Address: 1227 MERIDIAN AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139

**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:

Title: VP (X) Change ( ) Addition  
Name: BERRIOS, GERRY  
Address: 1227 MERIDIAN AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139

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: JIM CINTO

PD

05/18/2009

Electronic Signature of Signing Officer or Director

Date