2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716692

FILED Jan 21, 2009 Secretary of State

| Entity Name: 208 MERIDIAN CONDOMINIUM, INC. | | | | |
|---|--|----------------------------------|--|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | |
| | IAN AVENUE CH, FL 33139 | | | |
| Current Mailing Address: | | | New Mailing Address: | |
| 4445 WEST SUITE 308 HIALEAH, F | Γ 16 AVENUE FL 33012 | | | |
| FEI Number: | 65-0687428 | 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: | | | | |
| WAIDOTAS 255 NW 59 MIAMI, FL The above in the State | TH ST 33127 US named entity s | ubmits this statement for the pເ | urpose of changing its registere | d office or registered agent, or both, |
| SIGNATUR | E: | | | |
| | Electroni | c Signature of Registered Ager | nt | Date |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PD () I WAIDOTAS, BEA 255 NW 59TH S' MIAMI, FL 3312 | Г | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | STD () I WAIDOTAS, BEA 255 NW 59TH S' MIAMI, FL 3312 | Г | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | TD () I GONZALEZ, BEA 208 MERIDIAN A MIAMI BEACH, F | VE #3 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | SEC () I SITOMER, BARE 208 MERIDIAN A MIAMI BEACH, F | VENUE | Title: Name: Address: City-St-Zip: | () Change () Addition |

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: BEATA WAIDOTAS PD 01/21/2009