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

Secretary of State **DOCUMENT #720438** 02-26-2007 90052 013 ****61.25 ALOHA GARDENS CONDOMINIUM, INC. Mailing Address Principal Place of Business 40023564 7100 W. COMMERCIAL BLVD. 7100 W. COMMERCIAL BLVD. SUITE 107 SUITE 107 Lauderdale Lakes, FL 33319 HAUDERDALE LAKES, FL 33319 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02012007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-1510651 Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name AMBASSADOR COMMUNITY MANAGEMENT INC. Street Address (P.O. Box Number is Not Acceptable) 7100 W. COMMERCIAL BLVD., SUITE 107 LAUDERHILL, FL 33319 City 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, (NOTF: Registered Acent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. VPD TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GINGRAS, JACQUES STREET ADDRESS 5003 NW 35TH STREET, #601 STREET ADDRESS CITY-ST-ZIP LAUDERDALE LAKES, FL 33319 CJTY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition GUIMOND, JAQUES NAME NAME STREET ADDRESS 5003 NW 35TH STREET, #402 STREET ADDRESS CITY-ST-ZIP LAUDERDALE LAKES, FL 33319 CITY-ST-ZIP ☐ Delete ☐ Change □ Addition TITLE NAME RAMILLGED, GAETAN NAME 5003 NW 35TH STREET, #411 STREET ADDRESS STREET ADORESS CITY-ST-ZIP LAUDERDALE LAKES, FL 33319 CITY-ST-ZIP TITLE ☐ Delete ☐ Addition IVERS, IRIS STREET ADDRESS 5003 NW 35TH STREET, #412 STREET ADDRESS LAUDERDALE LAKES, FL 33319 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition POULIOT, MAURICE STREET ADDRESS 5003 NW 35 STREET, #407 STREET ADDRESS CITY-ST-ZIP LAUDERDALE LAKES, FL 33319 CITY-ST-ZIP ☐ Defete ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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: _

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feel. 20. 2007 954-730-8199

FILED

Feb 26, 2007 8:00 am