

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724438

FILED
Mar 26, 2009
Secretary of State

Entity Name: CONTEMPORARY CONDOMINIUM APARTMENTS, INC.

Current Principal Place of Business:

1620 SW 1ST ST
APT #2
MIAMI, FL 33135

New Principal Place of Business:

1620 SW 1ST ST
OFFICE
MIAMI, FL 33135

Current Mailing Address:

1620 SW 1ST ST
APT #2
MIAMI, FL 33135

New Mailing Address:

1620 SW 1ST ST
OFFICE
MIAMI, FL 33135

FEI Number: 59-2150695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, LAURA
440 N2 59TH COURT
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

BECERRA, LISANIA
1620 SW 1 STREET
17
MIAMI, FL 33135 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: LISANIA BECERRA

03/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOPEZ, LAURA
Address: 440 NW 59TH COURT
City-St-Zip: MIAMI, FL 33126

Title: V () Delete
Name: BECERRA, LISANIA
Address: 1620 SW 1ST STREET APT. 17
City-St-Zip: MIAMI, FL 33135

Title: T () Delete
Name: SALINAS, JUAN
Address: 1620 SW 1ST STREET, APT. 6
City-St-Zip: MIAMI, FL 33135

Title: S () Delete
Name: CABRERA, CONNIE
Address: 1620 SW 1 ST., APT 7
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BECERRA, LISANIA
Address: 1620 SW 1 STREET, APT. 17
City-St-Zip: MIAMI, FL 33135

Title: V (X) Change () Addition
Name: CINTRA, DULCE M
Address: 1620 SW 1ST STREET APT. 12
City-St-Zip: MIAMI, FL 33135

Title: T (X) Change () Addition
Name: GONZALEZ, RAUL
Address: 1620 SW 1ST STREET, APT. 3
City-St-Zip: MIAMI, FL 33135

Title: S (X) Change () Addition
Name: GONZALEZ, ANA M
Address: 1620 SW 1 ST., APT 19
City-St-Zip: MIAMI, FL 33135

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: RAUL GONZALEZ

TREA

03/26/2009

Electronic Signature of Signing Officer or Director

Date