2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725547

FILED Sep 18, 2008 Secretary of State

Entity Name: FOUNTAIN TOWERS CONDOMINIUM, INC. **Current Principal Place of Business: New Principal Place of Business:** 7118 BONITA DRIVE APT. 204 MIAMI BEACH, FL 33141 **Current Mailing Address: New Mailing Address:** FOUNTAIN TOWERS CONDO ASSOC 7118 BONITA DR #204 MIAMI BEACH, FL 33141 FEI Number: 59-1579491 FEI Number Applied For () FEI Number Not Applicable () 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: NAZER, JOSE DELGADO, JOAQUIN MR 2851 LEONARD DR 2740 W 5 AVENUE J601 HIALEAH, FL 33010 US AVENTURA, FL 33160 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: JOAQUIN R. DELGADO 09/18/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HERRERA, NELIA Name: Name: 7118 BONITA DR. APT 205 Address: Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: Title: Title: () Delete () Change () Addition FRANCISCO, LUIS Name: Name: Address: 7118 BONITA DR. APT 501 Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: Title: () Delete Title: () Change () Addition VAZQUEZ, ENRIQUE Name: Name: Address: 7118 BONITA DR APT 304 Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: Title: SD () Delete Title: () Change () Addition MARTINEZ, REINA Name: Name: 7118 BONITA DR SUITE 805 Address: Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: Title: () Delete Title: (X) Change () Addition RABASA, RUBEN SILVIA, TORRES Name: Name: 7118 BONITA DR. APT 802 7118 BONITA DR. APT 804 Address: Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33141

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: NELIA HERRERA PD 09/18/2008