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

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SIGNATURE:

Mar 12, 2007 8:00 am **Secretary of State DOCUMENT #729233** 03-12-2007 90375 018 ****61.25 1. Entity Name COSTA DEL SOL ASSOCIATION, INC. Principal Place of Business Mailing Address 40034505 1 COSTA DEL SOL BLVD 1 COSTA DEL SOL BLVD MIAMI, FL 33178 MIAMI, FL 33178 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 02152007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-1804186 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 SKRLD, INC Street Address (P.O. Box Number is Not Acceptable) 201 ALHAMBRA CIRCLE STE 1102 CORAL GABLES, FL 33134 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 (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TD X Addition TITLE Delete TITLE AMALIA FIGUERDA - BORGEN PEREZ, ELVIRA NAME NAME ONE COSTA DEL SOL BLVO. ONE COSTA DEL SOL BLVD. STREET ADDRESS STREET ADDRESS DORAL, FL 33178 CITY-ST-7IP CITY-ST-ZIP DORM. G. 33173 Change ☐ Addition TITLE ☐ Delete TITLE LOPEZ, ISABEL NAME NAME ONE COSTA DEL SOL BLVD STREET ADDRESS STREET ADDRESS **DORAL, FL 33178** CITY-ST-ZIP CITY-ST-ZIP VØ TITLE **⊠** Delete TIT) F ☐ Change **Addition** AND GOMUNOI ABBATE, ANDRES NAME NAME ONE COSTA DUSOL BLUD. STREET ADDRESS ONE COSTA DEL SOL BLVD. STREET ADDRESS 33178 Doese, H. CITY-ST-ZIP DORAL, FL 33178 CITY-ST-ZIP Delete TITLE Change Change Addition TITLE Georgina Gonzalez GONZALES, GEORGINA NAME NAME ONE COSTA Del Sol Blud. ONE COSTA DEL SOL BLVD. STREET ADDRESS STREET ADDRESS Assistant Sec. + Dire Alberto Ravelo CITY-ST-ZIP **DORAL, FL 33178** CITY-ST-ZIP Delete Addition TITLE ☐ Change TITLE FURGESON, JAMES NAME NAME ONE COSTA DEL SOL BLVO. ONE COSTA DEL SOL STREET ADDRESS STREET ADDRESS DORAL, FL 33178 CITY-ST-ZIP DOLM, A. 33178 CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 earnal 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.

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