2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jan 25, 2008 8:00 am **Secretary of State DOCUMENT #741178** 1. Entity Name 01-25-2008 90030 026 ****61.25 DEBORA CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address **7633 HARDING AVENUE** 29600 N. STATE ROUTE 83 STE 102 MUNDELEIN, IL 60060 US MIAMI BEACH, FL 33141 2. Principal Place of Business - No P.Q. Box # 3. Mailing Address 7633 Hardina Suite, Apt. #, etc. 01142008 CR2E037 (12/06) Applied For City & State 4. FEI Number 65-0082243 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Weinbaum **GUTIERREZ. SILVINO** Street Address (P.O. Box Number is Not Acceptable) 7633 HARDING AVE MIAMI BCH, FL 331412 City 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 Rochelle Weinbaum Signature, typed or printed frame of registered agent and title if applicable. TE: Registered Agent signature required when reinstating Make check payable to Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Raquel E. Gutierrez Delete Change ☐ Addition TITLE TITLE LAMBIN, GEORGOS NAME NAME fresident STREET ADDRESS 7633 HARDING AVE STREET ADDRESS 76.3.3. Harding Ave. CITY-ST-ZIP MIAMI BEACH, FL CITY-ST-ZIP TD Change ☐ Addition TITLE ☐ Delete TITLE PELLON, O FERNANDEZ NAME NAME STREET ADDRESS 7633 HARDING STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI BEACH, FL 33141 SD ☐ Change ☐ Addition ☐ Delete TITLE TITLE FREDERICK, LINDA NAME NAME STREET ADDRESS **7633 HARDING AVENUE** STREET ADDRESS MIAMI BEACH, FL 33141 CITY-ST-ZIP CITY-ST-ZIP ☐ Defete Change ■ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Channe ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

FILED

☐ Change

☐ Addition

12. Thereby 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 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.

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

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CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TOTE

NAME

SIGNATURE: Julia Juliuk LINDA J. FREDERICK 1/22/08 (847) 949-5805