

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741498

FILED
Apr 22, 2005
Secretary of State

Entity Name: MIAMI BEACH HOUSING, INC.

Current Principal Place of Business:

200 ALTON ROAD
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

200 ALTON ROAD
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 59-0603186 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYNES, KATHRYN ED
200 ALTON ROAD
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

DEL CAMPILLO, MIGUELL ED
200 ALTON ROAD
MIAMI BEACH, FL 33139 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: MIGEULL DEL CAMPILLO 04/22/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: ED () Delete
Name: HAYNES, KATHRYN
Address: 200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: FD (X) Delete
Name: GOROKHOVSKY, OLEG
Address: 200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: MD () Delete
Name: GARWICK, MATTHEW
Address: 200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: SPD () Delete
Name: O'HARA, MICHAEL
Address: 200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: HD () Delete
Name: PRENDES, ORLANDO
Address: 200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: HRD () Delete
Name: ESTEVEZ, KATHRYN
Address: 200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: DEL CAMPILLO, MIGUELL
Address: 200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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Name:
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MIGUELL DEL CAMPILLO ED 04/22/2005

Electronic Signature of Signing Officer or Director Date