

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 743169 1. Entity Name BAY VISTA CONDOMINIUM ASSOCIATION, INC.						FILED 2007 DEC 28 AM 10:12 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 860 N.E. 78TH STREET BOX 100 MIAMI, FL 33138				Mailing Address 860 N.E. 78TH STREET BOX 100 MIAMI, FL 33138			
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent SKRLD, INC. 201 ALHAMBRA CIRCLE STE.#1102 CORAL GABLES, FL 33134				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 <i>[Signature]</i> Secretary Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)						DATE 12/27/07	
FILE NOW!!! FEE IS \$236.25 After January 1, 2008, Fee will be \$297.50				Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BATTISTELLA, JOSE 860 NE 78TH ST., #502 MIAMI, FL 33138 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MOLNAR, JOSEPH 860 NE 78th Street, #503 MIAMI, FL 33138 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MONTAS, ROLAND 860 N.E. 78TH STREET, #304 MIAMI, FL 33138 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	400112507804 11/21/07--01033--005 **236.25 ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SONNET, ANA MONIKA 860 N.E. 78TH STREET, #207 MIAMI, FL 33138 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRODSON, CHARLES E 860 N.E. 78TH STREET, #506 MIAMI, FL 33138 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, NATALIE 860 N.E. 78TH STREET, #205 MIAMI, FL 33138 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PENA, EMILIA 2425 INAGUA AVENUE MIAMI, FL 33133 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
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 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.							
SIGNATURE: <i>[Signature]</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR						Date 11/18/2007 (305) 751 3464 Daytime Phone #	

B. Mitchell DEC 28 2007