

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 748230

FILED  
Oct 10, 2009  
Secretary of State

Entity Name: BLUE SKY ASSOCIATION, INC.

## Current Principal Place of Business:

7300 BYRON AVE  
14-B  
MIAMI BEACH, FL 33141

## New Principal Place of Business:

## Current Mailing Address:

7300 BYRON AVE  
14-B  
MIAMI BEACH, FL 33141

## New Mailing Address:

FEI Number: 59-1994834      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TORO, PILAR  
7300 BYRON AVE  
14-B  
MIAMI BEACH, FL 33141 US

## Name and Address of New Registered Agent:

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: PILAR TORO

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: URIBE, DONNA  
Address: 7300 BYRON AVE. #7  
City-St-Zip: MIAMI BEACH, FL 33141

Title: V ( ) Delete  
Name: CAMACHO, DESIDERIO  
Address: 7300 BYRON AVE. #14C  
City-St-Zip: MIAMI BEACH, FL 33141

Title: T ( ) Delete  
Name: TORO, GENARO A  
Address: 7300 BYRON AVE., #14B  
City-St-Zip: MIAMI BEACH, FL 33141

Title: S ( ) Delete  
Name: LEON, MARENA  
Address: 7300 BYRON AVE #15A  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete  
Name: URIBE, PEDRO  
Address: 7300 BYRON AVE.  
City-St-Zip: MIAMI BEACH, FL 33141

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: V ( ) Change (X) Addition  
Name: LEIKEN, MICHAEL J  
Address: 7300 BYRON AVE #H-1  
City-St-Zip: MIAMI BEACH, FL 33141 26

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: GENARO TORO

T

10/10/2009

Electronic Signature of Signing Officer or Director

Date