2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007
Secretary of State

DOCUMENT# 749556

Entity Name: BUILDING OWNERS AND MANAGERS ASSOCIATION MIAMI - DADE, INC.

Current Principal Place of Business:

ONE BISCAYNE TOWER
2 SOUTH BISCAYNE BLVD., SUITE 0204
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

ONE BISCAYNE TOWER
2 SOUTH BISCAYNE BLVD., SUITE 0204
MIAMI, FL 33131

New Mailing Address:

FEI Number: 59-2596238 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIAZ, MARLENE
5805 BLUE LAGOON DRIVE
440
MIAMI, FL 33126 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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	IPPD	( ) Delete
Name:	EDWARD, PRELAZ	
Address:	3390 MARY ST #260	
City-St-Zip:	COCONUT GROVE, FL 33133 US	
Title:	PD	( ) Delete
Name:	DIAZ, MARLENE	
Address:	5805 BLUE LAGOON DRIVE #440	
City-St-Zip:	MIAMI, FL 33126 US	
Title:	TD	( ) Delete
Name:	JOHNSON, LISA	
Address:	201 S. BISCAYNE BLVD., #910	
City-St-Zip:	MIAMI, FL 33131 US	
Title:	FVPD	( ) Delete
Name:	PORTA, PHILIP	
Address:	2 SOUTH BISCAYNE BLVD., #1470	
City-St-Zip:	MIAMI, FL 33131 US	
Title:	SD	( ) Delete
Name:	RIBERO, LILIANA	
Address:	20803 BISCAYNE BLVD., #200	
City-St-Zip:	AVENTURA, FL 33180 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	TD	(X) Change ( ) Addition
Name:	JOHNSON, LISA	
Address:	800 CORPORATE DR., #700	
City-St-Zip:	FT. LAUDERDALE, FL 33334 US	
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 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: MARLENE DIAZ PD 04/18/2007

Electronic Signature of Signing Officer or Director — Date