2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#751019

FILED Dec 17, 2007 Secretary of State

Entity Name: BEN-MOL CONDOMINIUM ASSOCIATION, INC.

Entity Nar	ME: BEN-MOL CONDOMINIUM ASSOCIATION, II	NC.	
Current Principal Place of Business:		New Principal	Place of Business:
	ON AVENUE ACH, FL 33141 US		
Current Mailing Address:		New Mailing Address:	
	ON AVENUE ACH, FL 33141 US		
In accordance	: 65-0666997 FEI Number Applied For() FEI ce with s. 607.193(2)(b), F.S., the corporation did not recei I Address of Current Registered Agent:	-	e () Certificate of Status Desired () Iress of New Registered Agent:
711 SW 15 MIAMI, FL	33135 US		
	named entity submits this statement for the purpose of Florida.	se of changing its re	gistered office or registered agent, or both,
SIGNATUF	RE: FRANCISCO DE LA PAZ		
	Electronic Signature of Registered Agent		Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CI	HANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	D () Delete URIBE, CONSUELO 7327 BYRON AVE #3 MIAMI BEACH, FL 33141	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete SARDINA, JULIANE 7325 BYRON AVE #6 MIAMI BEACH, FL 33141	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete SEREBRENIK, OSCAR 1816 CLEVELAND ROAD MIAMI BEACH, FL 33141	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete DE LA PAZ, FRANCISCO 711 SW 15TH AVE MIAMI, FL 33135	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	D () Delete HECHAVARRIA, ELBA C	Title: Name:	() Change () Addition

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: FRANCISCO DE LA PAZ D 12/17/2007