

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 752144 1. Entity Name GROVE PARADISE CONDOMINIUM, INC.						06 NOV -3 PM 2: 06	
Principal Place of Business 3202 WEST TRADE AVENUE MIAMI, FL 33133 US				Mailing Address C/O THE 12 HOUSE PROP MGMT P.O. BOX 452756 MIAMI, FL 33245			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 59-2165081				Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent THE 12 HOUSE PROP MGMT 1997 SW 1ST STREET MIAMI, FL 33135				7. Name and Address of New Registered Agent Name <u>ROSA de la CAMARA</u> Street Address (P.O. Box Number is not acceptable) <u>Becker + Potiakoff, P.A.</u> <u>121 Alhambra Plaza, 10th floor</u> City <u>Coral Gables</u> FL <u>33134</u>			
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 <u>De la Camara for Becker + Potiakoff, P.A.</u> Signature, typed or printed name of registered agent and title if applicable.				DATE <u>8/4/06</u> (NOTE: Registered Agent signature required when reinstating)			
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
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	DD ALVAREZ, MARLENE 3232 W. TRADE AVE., #15 COCONUT GROVE, FL 33133			TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD 600091503976 11/03/06--01044--001 **\$61.25		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD YALE, ANDREW 3231 BIRD AVE., #1V-6 COCONUT GROVE, FL 33133			TITLE NAME STREET ADDRESS CITY - ST - ZIP	DD 		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD KOSTRZEWSKI, WILLIAM P.O. BOX 012193 MIAMI, FL 33101			TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DD ALMUINA, JEFF 2050 CORAL WAY, SUITE 513 MIAMI, FL 33145			TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD TRAPP, STEVEN 3222 W. TRADE AVE., #111-1 COCONUT GROVE, FL 33133			TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD JOYCE, PATRICK 3223 BIRD AVE., #1V-2 COCONUT GROVE, FL 33133			TITLE NAME STREET ADDRESS CITY - ST - ZIP	DD		
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: <u>Stephen Trapp</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date <u>7/26/06</u>		Daytime Phone # <u>(305) 358-5171</u>	