

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 752144

1. Entity Name
GROVE PARADISE CONDOMINIUM, INC.



08 OCT 27 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 - No P.O. Box #

3. Mailing Address

40 C R Management & Inv.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

12955 SW 42nd Street, Suite 7

09182008 Chg-NP CR2E037 (12/06)

City & State

City & State

Miami, FL

4. FEI Number
59-2165081

Applied For
Not Applicable

Zip

Country

Zip

Country

33175

USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required ☐

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DE LA CAMARA, ROSA
BECKER & POLIAKOFF, P.A.
121 ALHAMBRA PLAZE, 10TH FLOOR
CORAL GABLES, FL 33134

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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 TD ☒ Delete
NAME ALVAREZ, MARLENE
STREET ADDRESS 3232 W. TRADE AVE., #15
CITY-ST-ZIP COCONUT GROVE, FL 33133

TITLE President ☐ Change ☒ Addition
NAME Seth R. Heller
STREET ADDRESS 3229 Bird Ave., Unit IV-5
CITY-ST-ZIP Coconut Grove, FL 33113

TITLE D ☒ Delete
NAME MARTINEZ, DIEGO
STREET ADDRESS 3200 W TRAVEL AVE
CITY-ST-ZIP COCONUT GROVE, FL 33133

TITLE Treasurer ☐ Change ☒ Addition
NAME ROSA Gallardo
STREET ADDRESS 3236 W. Trade Ave., Unit I-3
CITY-ST-ZIP Coconut Grove, FL 33133

TITLE PD ☒ Delete
NAME KOSTRZEWSKI, WILLIAM
STREET ADDRESS P.O. BOX 012193
CITY-ST-ZIP MIAMI, FL 33101

TITLE Secretary ☐ Change ☒ Addition
NAME Maria Del Socorro Villa
STREET ADDRESS 3227 Bird Ave., Unit IV-4
CITY-ST-ZIP Coconut Grove, FL 33133

TITLE VPD ☒ Delete
NAME ALMUINA, JEFF
STREET ADDRESS 2050 CORAL WAY, SUITE 513
CITY-ST-ZIP MIAMI, FL 33145

TITLE Director ☐ Change ☒ Addition
NAME Marta Alder
STREET ADDRESS 3240 W. Trade Ave., Unit I-1
CITY-ST-ZIP Coconut Grove, FL 33133

TITLE D ☐ Delete
NAME TRAPP, STEVEN
STREET ADDRESS 3222 W. TRADE AVE., #111-1
CITY-ST-ZIP COCONUT GROVE, FL 33133

TITLE Vice-President ☒ Change ☐ Addition
NAME Stephen T. Trapp
STREET ADDRESS 3222 W. Trade Ave., Unit III-1
CITY-ST-ZIP Coconut Grove, FL 33133

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/25/08

Date

(305) 225-1897

Daytime Phone #