2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
08 OCT 27 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 752144

1. Entity Name
GROVE PARADISE CONDOMINIUM, INC.

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
c/o CR 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
33175

Country
USA

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

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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	TITLE	President ☐ Change ☒ Addition
NAME	ALVAREZ, MARLENE	NAME	Seth R. Heller
STREET ADDRESS	3232 W. TRADE AVE., #I5	STREET ADDRESS	3229 Bird Ave., Unit IV-5
CITY-ST-ZIP	COCONUT GROVE, FL 33133	CITY-ST-ZIP	Coconut Grove, FL 33133
TITLE	D ☒ Delete	TITLE	Treasurer ☐ Change ☒ Addition
NAME	MARTINEZ, DIEGO	NAME	Rosa Gallardo
STREET ADDRESS	3200 W TRAVEL AVE	STREET ADDRESS	3236 W. Trade Ave., Unit I-3
CITY-ST-ZIP	COCONUT GROVE, FL 33133	CITY-ST-ZIP	Coconut Grove, FL 33133
TITLE	PD ☒ Delete	TITLE	Secretary ☐ Change ☒ Addition
NAME	KOSTRZEWSJI, WILLIAM	NAME	Maria Del Socorro Villa
STREET ADDRESS	P.O. BOX 012193	STREET ADDRESS	3227 Bird Ave., Unit IV-4
CITY-ST-ZIP	MIAMI, FL 33101	CITY-ST-ZIP	Coconut Grove, FL 33133
TITLE	VPD ☒ Delete	TITLE	Director ☐ Change ☒ Addition
NAME	ALMUINA, JEFF	NAME	Marta Alder
STREET ADDRESS	2050 CORAL WAY, SUITE 513	STREET ADDRESS	3240 W. Trade Ave., Unit I-1
CITY-ST-ZIP	MIAMI, FL 33145	CITY-ST-ZIP	Coconut Grove, FL 33133
TITLE	D ☐ Delete	TITLE	Vice-President ☒ Change ☐ Addition
NAME	TRAPP, STEVEN	NAME	Stephen T. Trapp
STREET ADDRESS	3222 W. TRADE AVE., #111-1	STREET ADDRESS	3222 W. Trade Ave., Unit III-1
CITY-ST-ZIP	COCONUT GROVE, FL 33133	CITY-ST-ZIP	Coconut Grove, FL 33133
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	300137328933
STREET ADDRESS		STREET ADDRESS	10/27/08--01061--014 **61.25
CITY-ST-ZIP		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: ✓ _____ ✓ 9/25/08 ✓(305) 225-1897
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #