2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#752380

FILED Apr 10, 2007 Secretary of State

Entity Name: 1245 WEST AVENUE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1245 WEST AVENUE APT 501 MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

801 SW 3 AVENUE STE 305 MIAMI, FL 33130

FEI Number: 59-2066265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GALIANA, MIRIAM H 801 SW 3 AVENUE STE 305 MIAMI, FL 33130 US

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:

Fladeric Construct David and American

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 P (X) Change () Addition

 Name:
 HERNANDEZ, LILLIAN
 Name:
 HERNANDEZ, LILLIAN

 Address:
 1245 WEST AVE #504
 Address:
 1245 WEST AVE #504

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

Title: S () Delete Title: S (X) Change () Addition Name: SUAREZ, MARINA, Name: SUAREZ, MARINA,

Natire. 307/NZE, MINNWS, 1245 WEST AVE, APT 503 Address: 1245 WEST AVE, APT 503 City-St-Zip: MIAMI BCACH, FL 33139

Title: () Delete Title: (X) Change () Addition RODRIGUEZ, MAGALY Name: MALDONADO-LOPEZ, MANUEL Name: Address: 1245 WEST AVE. #202 Address: 1245 WEST AVE, #201 City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

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: LILLIAN HERNANDEZ P 04/10/2007