

**2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 752616

**FILED**  
**Apr 11, 2007**  
**Secretary of State**

**Entity Name:** NAUTICO BAY CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6937 BAY DRIVE, #505  
MIAMI BEACH, FL 33141 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BONAFIDE MAGMT.  
POST OFFICE BOX 521458  
MIAMI, FL 33152

**New Mailing Address:**

**FEI Number:** 59-2248240      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

RUSSI, RICARDO  
C/O BONAFIDE MGMT GROUP, INC.  
3100 NW 72ND AVENUE, #125  
MIAMI, FL 33122 US

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

RUSSI, RICARDO  
C/O BONAFIDE MGMT GROUP, INC.  
3100 NW 72ND AVENUE, #127  
MIAMI, FL 33122 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: RICARDO RUSSI

04/11/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ANNUITI, CARLO  
Address: 6937 BAY DRIVE # 504  
City-St-Zip: MIAMI BEACH, FL 33141

Title: SD ( ) Delete  
Name: FERNANDEZ, JOSE  
Address: 6937 BAY DRIVE # 304  
City-St-Zip: MIAMI BEACH, FL 33141

Title: TD ( ) Delete  
Name: MENDES, SUSANA  
Address: 6937 BAY DRIVE # 505  
City-St-Zip: MIAMI BEACH, FL 33141

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RICARDO RUSSI

MGR

04/11/2007

Electronic Signature of Signing Officer or Director

Date