2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 13, 2006
Secretary of State

DOCUMENT# 755238

Entity Name: VIEW WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9415 SUNSET DRIVE
149
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

9415 SUNSET DRIVE
149
MIAMI, FL 33173

New Mailing Address:

FEI Number: 59-2238560 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MELONI, EDO P.A.
900 SW 40 AVE
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DELGADO, MARLEN
Address: 9415 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: SD ( ) Delete
Name: FRANCIS, JULIET
Address: 9415 SUNSET DR
City-St-Zip: MIAMI, FL 33173

Title: D ( ) Delete
Name: DELGADO, MARLEN
Address: 9415 SUNSET DR, # 149
City-St-Zip: MIAMI, FL 33173

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

Title: VP ( ) Change (X) Addition
Name: GAITAN, WILFREDO C MR.
Address: 15660 SW 82 CIRCLE LANE #6-7
City-St-Zip: MIAMI, FL 33193

Title: T ( ) Change (X) Addition
Name: BELZ, DOROTHEA E MS.
Address: 15680 SW 82 CIRCLE LANE #8-14
City-St-Zip: MIAMI, FL 33193

Title: D ( ) Change (X) Addition
Name: CORREA, BARBARA MS.
Address: 15695 SW 82 CIRCLE LANE #1-2
City-St-Zip: MIAMI, FL 33193

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: JULIETTE FRANCIS SD 04/13/2006

Electronic Signature of Signing Officer or Director — Date