

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758280

FILED
May 01, 2008
Secretary of State

Entity Name: CONDOMINIUM "B" ASSOCIATION AT MEDITERRANEA, INC.

Current Principal Place of Business:

323 IVES DAIRY RD
12
MIAMI, FL 33179 US

New Principal Place of Business:

Current Mailing Address:

323 IVES DAIRY RD
12
MIAMI, FL 33179 US

New Mailing Address:

FEI Number: 59-2144951 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:

GLAZER AND ASSOCIATES, P.A.
1920 E. HALLANDALE BEACH BLVD.
8TH FLOOR
HALLANDALE BEACH, FL 33009 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: SALTZMAN, YUSTY
Address: 337-04 IVES DAIRY ROAD
City-St-Zip: MIAMI, FL 33179

Title: V () Delete
Name: LEVIN, RAYMON
Address: 337-01 IVES DAIRY RD
City-St-Zip: MIAMI, FL 33179

Title: S () Delete
Name: GRAHAM, CHIMENE
Address: 323-05 IVES DAIRY RD
City-St-Zip: MIAMI, FL 33179

Title: T () Delete
Name: BARNES, SEAN
Address: 323-02 IVES DAIRY RD
City-St-Zip: MIAMI, FL 33179

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

I hereby certify that the information supplied with this filing does not qualify 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: SEAN BARNES

Electronic Signature of Signing Officer or Director

T

05/01/2008

Date