

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90077 028 ****61.25

DOCUMENT # 759090 1. Entity Name KENDALL WALK ASSOCIATION, INC.					
Principal Place of Business 119 SW 144 CT. STE. #201 MIAMI, FL 33186			Mailing Address 11981 SW 144 CT SUITE 201 MIAMI, FL 33186		
2. Principal Place of Business - No P.O. Box # 11981 SW 144 Ct.		3. Mailing Address Suite, Apt. #, etc. Suite #201			
City & State Miami Fl. 33186		City & State Miami Fl. 33186		4. FEI Number 59-2313489	
Zip U.S.		Zip U.S.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SKRLD, INC. — 201 ALHAMBRA CIRCLE SUITE 1102 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 use if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		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 NAME STREET ADDRESS CITY-ST-ZIP	SC SOLIS, MARIE 14920 SW 90TH TERRACE MIAMI, FL 33196	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Carmen Guevara 14916 SW 88th Ave Miami FL 33196	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GALLEGO, NUBIA 14920 SW 90 TERR. MIAMI, FL 33196	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Kevin	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRAVO, MARIA 14911 SW 90 TERRACE MIAMI, FL 33196	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Maria D. Bravo	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLUCK, JOSEPH 14911 SW 91 ST MIAMI, FL 33196	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KHANDAKER, ANAM 14915 SW 90 AVE. MIAMI, FL 33196	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KHANDAKER, ANAM I 14915 SW 90TH TERRACE MIAMI, FL 33196	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: <u>Maria D. Bravo</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			1/18/07 305-385-1410 Date Daytime Phone #		

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