

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763766

FILED  
Jan 10, 2009  
Secretary of State

Entity Name: 7626 BYRON CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7626 BYRON AVENUE  
#302  
MIAMI BEACH, FL 33141 US

**New Principal Place of Business:**

**Current Mailing Address:**

7626 BYRON AVENUE  
#302  
MIAMI BEACH, FL 33141 US

**New Mailing Address:**

FEI Number: 59-2400301      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ARTEAGA, EDUARDO  
7626 BYRON AVENUE, #302  
MIAMI BEACH, FL 33141 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: PD ( ) Delete  
Name: ARTEAGA, EDUARDO  
Address: 7626 BYRON AVENUE, #302  
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: SD ( ) Delete  
Name: RAMIREZ, LUCELY  
Address: 7626 BYRON AVE #202  
City-St-Zip: MIAMI BEACH, FL 33141

Title: TD ( ) Delete  
Name: FERNANDEZ, LILIA  
Address: 7626 BYRON AVENUE, #201  
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP ( ) Delete  
Name: RYAN, JOHN  
Address: 7626 BYRON AVE #401  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete  
Name: NAPOLITANO, HOLLY  
Address: 7626 BYRON AVE #301  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete  
Name: ZIDER, DANIEL  
Address: 7626 BYRON AVE #402  
City-St-Zip: MIAMI BEACH, FL 33141

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

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

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:

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: EDUARDO ARTEAGA

PD

01/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date