## 2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 767115  1. Entity Name INTERNATIONAL PARK CONDOMINIUM I ASSOCIATION, INC.								FILED 04 NOV -5 PM 1:08			
Principal Place of Business 11750 - 11780 SW 18TH ST MIAMI, FL 33162				Mailing Address 2500 NW 97 AVE SUITE 200 MIAMI, FL 33172			SECRETARY OF STATE TALLAHASSEE, FLORIDA				
2. Principal P	lace of Busine	ess	3. Mai	Mailing Address							
Suite, Apt.	#, etc.	,	Su	Suite, Apt. #, etc.			10212004 <sub>C</sub>	hg-NP C	R2E037 (10/03)		
City & State			City & State				4. FEI Number         Applied For.           59-2247624         Not Applicable				
Zip		Country	Zij	) 	Country		5. Certificate of Si	tatus Desired [	\$8.75 Add Fee Required		
	6. Name	and Address of Current	Register	ed Agent	N <sub>i</sub>	ame	7. Name and Add	lress of New Regis	tered Agent		
SPM GROUP, INC							Street Address (P.O. Box Number is Not Acceptable)				
2500 NW 97 AVE SUITE 200						11/05/0401030001 **61.25					
MIAMI, FL 33172						City FL Zip Code					
		submits this statement for	or the purp	ose of changing its	registered of	fice or registe	ered agent, or both, in	the State of Florida		and accept	
the obligations of registered agent.											
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
Amended AR is \$61.25  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State											
10.	OFFICERS AND DIRECTORS 11						ADDITIONS/CHANG	ES TO OFFICERS A		10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP					DRESS 1 17	evez, semji 50 sw 185 iani, 771. 33	0 4. <del>4</del> 3175	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Delete AVENDANO, JAIRO 11750 SW 18 ST #419					DS Lob DRESS 1178	11ma, Ilum 1654 1654 1001   F1. 33	ninada +114	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Delete TIT ESTOVEZ, SERGIO 11750 SW 18 ST APT MIAMI, FL 33175  Delete TIT STF								Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						DALESS 117.11	cia, Felix D SW 1851, warn , Fl. : wardo, Como CO SW 18 ami , Fl 331	cepción St. tsol	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET AD CITY-ST-Z				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-			☐ Delete	TITLE NAME STREET AD CITY-ST-2				☐ Change	Addition	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 of the fectiver or truetee 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 en an attachment with an address, with all other like empowered. SIGNATURE:											
SHINA	UKE: _	SIGNATURE AND TYPED OR	PRINTED NA	ME OF SIGNING OFFICER	OR DIRECTOR			Date	Daytime Phone #		