
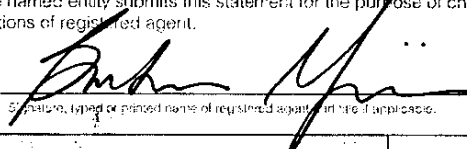


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2008 8:00 am
Secretary of State

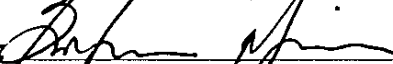
02-25-2008 90062 004 ****61.25

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|---|-----------------------------------|---|---|---|---|
| DOCUMENT # 768653 | | | |  | |
| 1. Entity Name BIRD INDUSTRIAL CONDOMINIUMS ASSOCIATION, INC. | | | | | |
| Principal Place of Business 4240-70 SW 73RD AVE MIAMI FL 33155 US | | | Mailing Address 3201 NE 183RD ST. #704 AVENTURA FL 33160 US | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address C/O NEIJNA | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. 3769 MAIN HWY | | | |
| City & State | | City & State COCONUT GROVE FL | | 4. FEI Number 59-2350367 | |
| Zip | Country | Zip | Country | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| | | 33133 | USA | Applied For Not Applicable | |
| 6. Name and Address of Current Registered Agent BERG, ESTELLE 3201 NW 183RD ST. #704 AVENTURA FL 33160 | | | 7. Name and Address of New Registered Agent Name NEIJNA, BARBARA Street Address (P.O. Box Number is Not Acceptable) 3769 MAIN HWY City COCONUT GROVE FL Zip Code 33133 | | |
| 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  | | | DATE 2/11/08 | | |
| FILE NOW: FEE IS \$61.25 Due By May 1, 2008 | | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 | P | <input checked="" type="checkbox"/> Delete | TITLE | P | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | BERG, PAUL | | NAME | MARSHALL, BRIAN | |
| STREET ADDRESS | 3201 NE 183RD STREET # 704 | | STREET ADDRESS | 9222 SW 136 TERRACE | |
| CITY-ST-ZIP | AVENTURA FL 33160 | | CITY-ST-ZIP | MIAMI FL 33176 | |
| TITLE | ST | <input type="checkbox"/> Delete | TITLE | D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BERG, ESTELLE | | NAME | BERG, ESTELLE | |
| STREET ADDRESS | 3201 NE 183RD STREET #704 | | STREET ADDRESS | 3201 NE 183 STREET #704 | |
| CITY-ST-ZIP | AVENTURA FL 33160 | | CITY-ST-ZIP | AVENTURA FL 33160 | |
| TITLE | D | <input checked="" type="checkbox"/> Delete | TITLE | VP | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | HENKEL, DENNIS | | NAME | ALEX ALVAREZ | |
| STREET ADDRESS | 4268 SW 73RD. AVENUE | | STREET ADDRESS | 7270 SW 42 STREET | |
| CITY-ST-ZIP | MIAMI FL 33155 | | CITY-ST-ZIP | MIAMI FL 33155 | |
| TITLE | D | <input type="checkbox"/> Delete | TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | WONG, VICTOR | | NAME | | |
| STREET ADDRESS | 2950 SW 27TH AVE, STE 310 | | STREET ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL 33133 | | CITY-ST-ZIP | | |
| TITLE | VP | <input checked="" type="checkbox"/> Delete | TITLE | S/T | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | SCHULTZ, MARK | | NAME | BARBARA NEIJNA | |
| STREET ADDRESS | 10811 159TH CT N | | STREET ADDRESS | 3769 MAIN HWY | |
| CITY-ST-ZIP | JUPITER FL 33478 | | CITY-ST-ZIP | COCONUT GROVE FL 33133 | |
| TITLE | D | <input type="checkbox"/> Delete | TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | RODRIGUEZ, ROLANDO | | NAME | | |
| STREET ADDRESS | 4246-48 SW 73RD AVE. | | STREET ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL 33155 | | CITY-ST-ZIP | | |



1st MOORE CR2E037 (10/07)

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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  DATE **2/11/08** **305-264-2460**