2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 04, 2008 8:00 am Secretary of State 02-04-2008 90059 046 ****61.25

Country Zip Country Zip Country S. Cartificate of Status Desired \$8.75 Addisions of Required Fee Required Fe	ļ	IMENT # 768912 THE CONDOMINIUM NO. (ONE, INC.		02-04-2008 90059 046 ****61.25		
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City & State City & State	2. Principal Place of Business - No P.O. Box #		3. Mailing Address			<u> </u>	
Zip Country Zip Country 5.9-2583134 No.A.A.D. Zip Country Zip Country 5. Certificate of Status Desired	·		Suite, Apt. #, etc.		01112008 Chg-N	P CR2E037 (12/06)	
S. Certificate of States Desired S. Certificate of States Desired S. Certificate of States Desired Sta		ite				1 — 1 — 1 — 1	iea For Applicable
DELGADO, JOAQUIN % WOODS MANAGEMENT 2740 WEST 5 AVENUE HIALEAH, FL 33010 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 a the obligations of registered agent. SIGNATURE Filling Fee is \$61.25 Due by May 1, 2008 9. Election Compaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 INTE MANE STREE ADDRESS GITY-S1-2P HIALEAH, FL 33016 INTE CITY S1-2P CITY OFFICERS AND DIRECTORS INTE STREE ADDRESS GITY-S1-2P HIALEAH, FL 33016 INTE MAME PEREZ, LUIS STREE ADDRESS GITY-S1-2P HIALEAH, FL 33016 Delete INTE NAME STREE ADDRESS GITY-S1-2P HIALEAH, FL 33016 Delete INTE NAME STREE ADDRESS GITY-S1-2P HIALEAH, FL 33016 Delete INTE NAME STREE ADDRESS GITY-S1-2P HIALEAH, FL 33016 Delete INTE NAME STREE ADDRESS GITY-S1-2P TIME NAME STREE ADDRESS GITY-S1-2P HIALEAH, FL 33016 Delete INTE NAME STREE ADDRESS GITY-S1-2P GITHER NAME STREE ADDRESS GITY-S1-2P TIME NAME STREE ADDRESS GITY-S1-2P GITHER NAME STREE ADDRESS GITY-S1-2P TIME NAME ST	Zip	Country	Zip	Country	5. Certificate of Status		onal
WOODS MANAGEMENT 2740 WEST 5 AVENUE HIALEAH, FL 33010 City FL Zip Code			t Registered Agent	Name	7. Name and Address	of New Registered Agent	
HIALEAH, FL 33010 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 a the obligations of registered agent. SIGNATURE Filing Fee is \$61.25 Due by May 1, 2008 9. Election Compagin Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 INTE ECHEVARRIA, ALBERTO SIREL ADDRESS SIREL	% WOOD	S MANAGEMENT		Street Addres	s (P.O. Box Number is Not A	cceptable)	-, -
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 a the obligations of registered agent. SIGNATURE Filling Fee is \$61.25 Due by May 1, 2008 9. Election Campaign Financing Trust Fund Contribution. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 10 ECHEVARRIA, ALBERTO SIREE ADDRESS CITY-SI-2P HIALEAH, FL 33016 IIILE NAME CITY-SI-2P MAME SIREE ADDRESS CITY-SI-2P MIME NAME SIREE ADDRESS CITY-SI-2P HIALEAH, FL 33016 IIILE NAME SIREE ADDRESS CITY-SI-2P HIALEAH SIREE ADDRESS CI	L						
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12. Thereby 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 informat 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 dire of the corporation or the receiver or trustee empowered presented his report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block changed, or on an attachment with an attrest, with all province empowered. SIGNATURE: SIGNATURE: SIGNATURE	NAME STREET ADDRESS CITY-ST-ZIP LITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CINTRONNELLE, JESUS 8826 SW 111 TERR MIAMI, Ft. 33176 PD PEREZ, LUIS 5663 W 28 AVE HIALEAH, FL. 33016	Delete Delete	TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP	Tronnelle, I	Change Ch	Addition Addition Addition Addition