2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 25, 2006 8:00 am Secretary of State

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DOCUMENT # 769088 1. Entity Name 1350 RED ROAD PROFESSIONAL BUILDING CONDOMINIUM ASSOCIATION, INC.									04-26-1	2006 9019	2 021 ****	61.25
1350 RED ROAD P			P.O. B	Mailing Address P.O. BOX 558315 MIAMI, FL 33255					66	02217	9	
Principal Place of Business 3.			3. Mailir	ng Address	-\	~ @						
Suite, Apt. #, etc.				3708 Alcantora ave				07400000				
Suite, Apt. #, etc.			Juli	Suite, Apt. #, etc.				07192006	Chg-NP	CR	2E037 (4/06)	
City & State				City & State F			4. FEI Number 59-2766792				N	opplied For lot Applicable
Žip	Zip Country			33178 D		intry	5. Certificate of Status				\$8.75 Ac Fee Requir	
	6. Name	and Address of Current	Registered	d Agent		Name		7. Name and	Address of	New Register	ed Agent	
SARDUY, PEDRO S M.D. 6880 CORAL WAY						Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL 33155								-/ I 1 <u></u>	<u></u>			
						FL Zu Soden S						
		y submits this statement fo	r the purpo	se of changing its	register	ed office or	r register	red agent, or bo	th, in the State	e of Florida. I	am familiar with	n, and accept
the obligat	tions of regist	tered agent.										
SIGNATURE .												
	Clange on transf											
	Signature, typeu	or printed name of registered agent	and title if appli	cable. (NOTE	E: Registere	ed Agent signat	ure required	d when reinstating)		DA	TE	
D	Filing Fe	ee is \$61.25 otember 6, 2006	and title if appli	9. Election Car Trust Fund C	npaign f	inancing	ure required	\$5.00 May E		Make ch	TE neck payable partment of S	
10.	Filing Fe	e is \$61.25		9. Election Car	npaign f	Financing tion.		\$5.00 May E	.	Make ch Florida De	neck payable partment of S	N 10
10.	Filing Fe ue by Sep P	ee is \$61.25 otember 6, 2006 OFFICERS AND DIF		9. Election Car	npaign F Contribut	Financing tion.		\$5.00 May E Added to Fees ADDITIONS/CH	ANGES TO C	Make ch Florida De	partment of S	N 10
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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 repeiver 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.

STREET ADDRESS CITY+ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

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7/106 305-333-8566