2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770894

FILED Mar 15, 2005 Secretary of State

Entity Name: KENDALL CROSSINGS COMMERCE CENTER SECTION TWO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

12200 THRU 12250 SW 131 AVE MIAMI, FL 33186 US

Current Mailing Address:

New Mailing Address:

7885 S.W. 108TH STREET MIAMI, FL 331563613

12210 SW 131 AVENUE ATTN: PAUL IHASZ MIAMI, FL 33186

FEI Number: 65-0445025 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PAUL, IHASZ 12210 SW 131 AVENUE MIAMI, FL 33186

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete KINNEY, RON Name: Address:

12200 SW 131ST AVE City-St-Zip: MIAMI, FL 33186

Title: () Delete

Name: PAUL, HASZ

City-St-Zip:

Address: 12210 SW 131 AVENUE City-St-Zip: MIAMI, FL 33186

Title: () Delete HERNAN, GARCES Name: 12226 SW 131 AVENUE Address:

MIAMI, FL 33186

(X) Change () Addition

KINNEY, RON Name: Address: 12200 SW 131 AVENUE City-St-Zip: MIAMI, FL 33186

Title: STD (X) Change () Addition

Name: PAUL, IHASZ

Address: 12210 SW 131 AVENUE City-St-Zip: MIAMI, FL 33186

Title: VPD (X) Change () Addition

Name: HERMAN, GARCES Address: 12228 SW 131 AVENUE City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL IHASZ STD 03/15/2005