


2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 770894 1. Entity Name KENDALL CROSSINGS COMMERCE CENTER SECTION TWO CONDOMINIUM ASSOCIATION, INC.	
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FILED
09 JAN 30 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 12200 THRU 12250 SW 131 AVE MIAMI, FL 33186 US	Mailing Address 12210 SW 131 AVENUE ATTN: PAUL IHASZ MIAMI, FL 33186 US
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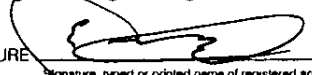
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address OCEAN MANAGEMENT & INVEST. Suite, Apt. #, etc. P.O. Box 831741	01052009 Chg-NP CR2E037 (11/08)
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City & State Miami, FL	4. FEI Number 65-0445025	Applied For Not Applicable
Zip 33283	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent IHASZ, PAUL 12210 SW 131 AVENUE MIAMI, FL 33186	7. Name and Address of New Registered Agent Name OCEAN MANAGEMENT & INVESTMENT CORP. Street Address (P.O. Box Number is Not Acceptable) 12350 SW 132 CT #211 City Miami FL Zip Code 33186
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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.

400141765524

SIGNATURE:  **Edgar Fornella Property Manager** 01/22/09--01018--011 **\$61.25

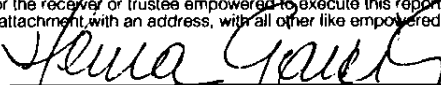
DATE

Filing Fee is \$61.25 Due by May 1, 2009	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
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10. OFFICERS AND DIRECTORS	
TITLE	STD <input type="checkbox"/> Delete
NAME	IHASZ, PAUL
STREET ADDRESS	12210 SW 131 AVENUE
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	VPD <input type="checkbox"/> Delete
NAME	GARGES, HERMAN
STREET ADDRESS	12228 SW 131 AVENUE
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	IHASZ, PAUL
STREET ADDRESS	12210 SW 131 AV
CITY-ST-ZIP	Miami FL 33186
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARGES, HERMAN
STREET ADDRESS	12228 SW 131 AV
CITY-ST-ZIP	Miami FL 33186
TITLE	SEC. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BELLO, ODALYS
STREET ADDRESS	12230 SW 131 AV.
CITY-ST-ZIP	Miami FL 33186
TITLE	PRES. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FRANK TORMES
STREET ADDRESS	13084 SW 136 TH
CITY-ST-ZIP	Miami FL 33186
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 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:  01/12/09

Date Daytime Phone #