2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004738

FILED Apr 29, 2008 Secretary of State

Entity Name: SOUTH MIAMI AVENUE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 601 BRICKELL KEY DRIVE SUITE 705 MIAMI, FL 33131 **Current Mailing Address: New Mailing Address:** C/O VEATER, 41 SW 18TH TERRACE C/O VEATER MIAMI, FL 33129 41 SW 18TH TERRACE MIAMI, FL 33129 FEI Number: 65-1047682 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: DE LA PENA & ASSOCIATES, LLP 601 BRICKELL KEY DRIVE SÚITÉ 705 MIAMI, FL 33131 US 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: () Change () Addition () Delete VEATER, COLIN D MR Name: Name: 41 SW 18TH TERRACE Address: Address: City-St-Zip: MIAMI, FL 33129 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: RUSSELL, STEPHANIE MRS Name: RUSSELL, STEPHANIE MRS Address: 51 SW 22ND STREET Address: 51 SW 22ND STREET City-St-Zip: MIAMI, FL 33129 City-St-Zip: MIAMI, FL 33129 Title: (X) Delete Title: () Change () Addition BOLLET, APRIL MRS Name: Name: 50 SW 21ST ROAD Address: Address: City-St-Zip: MIAMI, FL 33129 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: RAMOS, SANDRO MR Name: 1805 SOUTH MIAMI AVENUE Address: Address: City-St-Zip: MIAMI, FL 33129 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition MCCABE, ROBERT DR. Name: Name: 1601 SOUTH MIAMI AVENUE Address: Address: City-St-Zip: MIAMI, FL 33129 City-St-Zip: Title: () Delete Title: (X) Change () Addition GRIFFIN, HENRY MR BORJA, PAUL MR Name: Name: Address: 2135 SOUTH MIAMI AVENUE Address: 1815 SOUTH MIAMI AVENUE MIAMI, FL 33129 MIAMI, FL 33129 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: COLIN VEATER P 04/29/2008