


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Mar 26, 2007 08:00 AM
Secretary of State**

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|---|---|
| DOCUMENT # N01000003477 1. Entity Name 2552 CONDOMINIUM INC. |  |
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| Principal Place of Business 2552 SW 9TH ST, #3 MIAMI, FL 33135 | Mailing Address 2552 SW 9TH ST, #3 MIAMI, FL 33135 |
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03202007 No Chg-NP CR2E037 (4/06)

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| 4. FEI Number 65-1105994 | Applied For Not Applicable |
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|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent GARCIA, JAIME H 2552 SW 9TH ST, #3 MIAMI, FL 33135 |
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IN THIS SPACE**

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.

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|---|--|------------|
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small> | (NOTE: Registered Agent signature required when reinstating) | DATE _____ |
|---|--|------------|

**Filing Fee is \$61.25
Due by May 1, 2007**

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|--|------------------------------------|
| 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP GARCIA, MARIA G 2552 SW 9TH ST, #3 MIAMI, FL 33135 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT GARCIA, JAIME H 2552 SW 9TH ST, #3 MIAMI, FL 33135 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DS GARCIA, DAVID H 2552 SW 9TH ST, #3 MIAMI, FL 33135 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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04/03/07-80027-003 61.25

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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 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: Jaime Garcia
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 3/26/07 Daytime Phone: 305-448-6982