


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 21, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # N01000003477</b> 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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03172008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1105994	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

GARCIA, JAIME H  
 2552 SW 9TH ST, #3  
 MIAMI, FL 33135

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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.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25  
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

000000366215  
04/08/08-80037-007 61.25

10. OFFICERS AND DIRECTORS	
TITLE	DP
NAME	GARCIA, MARIA G
STREET ADDRESS	2552 SW 9TH ST, #3
CITY-ST-ZIP	MIAMI, FL 33135
TITLE	DT
NAME	GARCIA, JAIME H
STREET ADDRESS	2552 SW 9TH ST, #3
CITY-ST-ZIP	MIAMI, FL 33135
TITLE	DS
NAME	GARCIA, DAVID H
STREET ADDRESS	2552 SW 9TH ST, #3
CITY-ST-ZIP	MIAMI, FL 33135
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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 H Garcia 305 498-6983 3/17/08 305  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #