2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N01000003618

FILED May 12, 2006 Secretary of State

Entity Name: CASABLANCA CONDOMINIUM ASSOCIATION OF SOUTH BEACH, INC.

Current Principal Place of Business: New Principal Place of Business:

309-23RD STREET 817-821 MERIDIAN AVENUE MIAMI BEACH, FL 33139 # 300

MIAMI BEACH, FL 33139

New Mailing Address: Current Mailing Address:

309-23RD STREET C/O BLUE SKY MIAMI, INC 1680 MICHIGAN AVE, SUITE 908 #300 MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

FEI Number: 03-0433192 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:

REGATTA REAL ESTATE MGT INC GOMEZ, MICHAEL 309-23RD STREET 1930 TYLER ST #300 HOLLYWOOD, FL 33120 US MIAMI BEACH, FL 33139 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: MICHAEL GOMEZ 05/12/2006 Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

in the State of Florida.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

(X) Change () Addition () Delete GARCIA, CHRISTIAN GARCIA, CHRISTIAN Name: Name:

821 MERIDIAN AVE Address: 821 MERIDIAN AVE Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD () Delete Title: (X) Change () Addition DOBSON, AMELIA Name: DOBSON, AMELIA Name:

Address: 821 MERIDIAN AVE Address: 821 MERIDIAN AVE City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete Title: () Change () Addition

NOVOGRAD, NICOLAS Name: Name: 821 MERIDIAN AVE Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip:

Title: () Delete Title: () Change () Addition

CRUZ, PAULÍNA Name: Name: 821 MERIDIANAVE Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

CORDOVA, CHRISTIAN Name: Name: 821 MERIDIAN AVE Address: Address: MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CG/AMM D 05/12/2006