


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

FILED
Apr 12, 2007 8:00 am
Secretary of State

04-12-2007 90034 019 ****61.25

| | |
|---|---|
| DOCUMENT # N02000003886 |  |
| 1. Entity Name SUNSET 102 OFFICE PARK CONDOMINIUM ASSOCIATION, INC. | |

| | |
|---|---|
| Principal Place of Business 10251 SW 72 ST. MIAMI, FL 33173 | Mailing Address 400 SW 107TH AVE. #312 MIAMI, FL 33174 |
|---|---|

DO NOT WRITE IN THIS SPACE



04052007 No Chg-NP CR2E037 (4/06)


| | |
|---|-----------------------------------|
| 4. FEI Number 01-0735142 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

RUIZHEZ, ALBERT
10251 S.W. 72ND STREET, #B-102
MIAMI, FL 33173

**DO NOT WRITE
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.

SIGNATURE  DATE 4/9/2007

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, 2007 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|--|

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD RUIZ, ALBERT 10281 S.W. 72 STREET, B-102 MIAMI, FL 33173 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD COSTARANGOS, CONSTANTINO 10251 S.W. 72 STREET, A-101 MIAMI, FL 33173 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD RODRIGUEZ, SILVIA 10261 S.W. 72 STREET, C-104 MIAMI, FL 33173 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

**DO NOT WRITE
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  Albert Ruiz 4/9/2007 (3:25) 220-5684

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #